

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N01000001387

1. Entity Name
HOOD TEMPLE AFRICAN METHODIST EPISCOPAL ZION
CHURCH, INC.



FILED

05 MAY -4 PM 12: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3608 N. 26TH ST.
TAMPA, FL 33605

Mailing Address
PO BOX 310635
TAMPA, FL 33680-0635

2. Principal Place of Business

3. Mailing Address
3608 N. 26th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Tampa, FL

Zip

Country

Zip
33605

Country
USA

4. FEI Number
59-3639169

Applied For,
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WASHINGTON, SHERMAN REV.
2615A E 29TH AVE
TAMPA, FL 33605

Name
Rev. George N. Bolden, Jr.

Street Address (P.O. Box Number is Not Acceptable)
3608 N. 26th Street

800054513338

City
Tampa

05/13/05--01054--003 **112.50
FL 33605

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

George N. Bolden, Jr. George N. Bolden, Jr. Pastor/Chmn.

March 24, 2005

Signature, typed or printed name of registered agent and agent applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TT
BEJAMIN-MATHEW, ZILLIAN
1201 ST ROYAL PLACE
TAMPA, FL 33612 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/T
Russell, Clara
2206 E. Ida Street
Tampa, FL 33610 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPT
HOYTE, CAROLE
3415 N LAKE ST
TAMPA, FL 33610 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T
Wright, Barbara J.
8707 Busch Oaks Street
Tampa, FL 33617 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPT
GANO, DEBORAH
1007 E. GENNESSEE ST.
TAMPA, FL 33603 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
800054513338
05/13/05--01054--004 **185.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
PETWAY, MARGARET
1907 SADDLELAKE PL
BRANDON, FL 33511 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/T
Petway, Margaret
7611 Nottingham Sky Drive
Apollo Beach, FL 33572 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Margaret Petway

Margaret Petway

3/24/05 (813)253-7713

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #