2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N01000005673 OCALA ZION UNITED METHODIST CHURCH. INCORPORATED 08 DEC - 1 PH 4: 25 Principal Place of Business Mailing Address AHASSEE, FLORIUA 510 NW MARTIN LUTHER KING JR AVE P.O. BOX 1613 OCALA, FL 34474 OCALA, FL 34478 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 11252008 REIN-NP CR2E099 (1/07) 4. FEI Number 59-3046751 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WHITE GRIFFIN, JIMMI Street Address (P.O. Box Number is Not Acceptable) 301 SW 145TH ST OCALA, FL 34473 2224 NW 243 Zip Code 34475 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** DATE FILE NOW!!! FEE IS \$236.25 Make check payable to After January 1, 2009, Fee will be \$297.50 Fiorida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TRUSTEE Addition TITLE TRUSTEE ☐ Delete TITLE • RILEY, ISAAC NAME NAME JOHN ATKINSON STREET ADDRESS 4490 S.W. 151ST STREET STREET ADDRESS 4795 NW 684, STREET OCALA, FL 34473 CITY-ST-ZIP CITY-ST-ZIP OCALA, FL 34482 ☐ Change TITLE DTRUSTEE ☐ Delete TITLE X Addition RUBY GARVIN, TRUSTEE **NELSON, WILLIE** NAME 1765 SW54 STREET 1603 NW BLITCHTON RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **OCALA, FL 34475** CITY-ST-ZIP TITLE Delete TITLE FRUSTEE ☐ Change Addition ERNEST GORDAN 1306 W. SILV, SPGS. BLUD. GRIFFEN, JIM NAME NAME STREET ADDRESS 301 SW 145TH ST STREET ADDRESS CITY-ST-ZIP OCALA, FL 34473 CITY-ST-ZIP OCALA FL 34475 ΠΠF Delete TITLE **Addition** ARTHUR S. WHITE TRUSTEE COLEMAN, NANCY NAME NAME PORT NW BUY ROAD STREET ADDRESS 2029 SW 5TH STREET STREET ADDRESS CITY-ST-ZIP **OCALA, FL 34474** CITY-ST-ZIP V TRUSTEE Change ☐ Addition TITLE Delete TITLE MACK, WILLIE MAE NAME NAME STREET ADDRESS 303 NW 11TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **OCALA, FL 34475** TITLE Change ☐ Addition TITLE ☐ Delete DTRUSTEE WILLIAMS, SAM NAME STREET ADDRESS 16752 NORTH HWY 329 STREET ADDRESS CITY-ST-ZIP REDDICK, FL 32686 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

Cothur & White

11/29/08

(352)629-4359

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