2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 08, 2004
Secretary of State

DOCUMENT# N03000006920

Entity Name: CHARTER FINANCIAL SERVICES, INC.

Current Principal Place of Business:

5618 NEWTON AVE. SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

5618 NEWTON AVE. SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 65-1200061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CIAFONE, FRANK S JR.
5618 NEWTON AVE. SOUTH
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIRE ( ) Change (X) Addition
Name: CIAFONE,JR., FRANK S MR.
Address: 1026 61ST SOUTH
City-St-Zip: GULFPORT, FL 33707 US

Title: DIRE ( ) Change (X) Addition
Name: JENNINGS, JUDITH E MS.
Address: 360 57TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: TRUS ( ) Change (X) Addition
Name: JENNINGS, NATHANIEL L MR.
Address: 360 57TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK S. CIAFONE, JR. DIRE 10/08/2004

Electronic Signature of Signing Officer or Director — Date