

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT


FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUL 11 AM 9:36

REINSTATEMENT 05-06

DOCUMENT # N03000007475

1. Entity Name
NAAHR-TAMPA BAY CHAPTER, INC.
NAAAHR-TAMPA BAY CHAPTER, INC.



Principal Place of Business
P. O. BOX 341814
TAMPA, FL 33694

Mailing Address
P. O. BOX 341814
TAMPA, FL 33694

2. Principal Place of Business
P.O. Box 3261

3. Mailing Address
P.O. Box 3261

Suite, Apt. #, etc.

City & State
Brandon, FL


City & State
Brandon, FL

Zip
33509

Country
Hillsborough

Zip
33509

Country
Hillsborough



05242006 REIN-NP CR2E099 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, RICHARD
4925 INDEPENDENCE PKWY.
TAMPA, FL 33634

7. Name and Address of New Registered Agent

Name *Kelvin R. DeCoursey*

Street Address (P.O. Box Number is Not Acceptable)
2710 Brookville Dr.

City *Valrico* FL Zip Code *33594*

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 *Kelvin R. DeCoursey* *2006 President* DATE *July 10, 2006*

20007720052
07/19/06--01023--023 **122.50

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HILL, RICHARD	
STREET ADDRESS	P. O. BOX 341814	
CITY-ST-ZIP	TAMPA, FL 33694	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DAVIS-GRYCE, CYNTHIA	
STREET ADDRESS	8434 PAXTON DR.	
CITY-ST-ZIP	PORT RICHEY, FL 34668	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	COLEMAN, HOSETTA	
STREET ADDRESS	6611 BAYBROOK CIR.	
CITY-ST-ZIP	TEMPLE TERR., FL 33617	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GLOSTER, EARL	
STREET ADDRESS	P. O. BOX 341814	
CITY-ST-ZIP	TAMPA, FL 33694	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HENLEY, VANESSA	
STREET ADDRESS	P. O. BOX 341814	
CITY-ST-ZIP	TAMPA, FL 33694	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BATIE, LAFERN	
STREET ADDRESS	16701 WINDSOR PARK DR.	
CITY-ST-ZIP	LUTZ, FL 33549	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>DeCoursey, Kelvin R.</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Christy-Martin, Shiela</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Pinnery, Anna</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Chambers, Mikki</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Dickerson, Kisha</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Purifoy, Lovese</i>	
STREET ADDRESS	<i>P.O. Box 3261</i>	
CITY-ST-ZIP	<i>Brandon, FL 33509</i>	<i>"D"</i>

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.

SIGNATURE: *Kelvin R. DeCoursey* *July 10, 2006* (813) 230-7041

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2006

LOLITA A. WYNN, CPA corrected copy
6011 FAYETTEVILLE RD., SUITE 202
DURHAM, NC 27713

The Articles of Incorporation for NAAAHR-TAMPA BAY CHAPTER, INC. were filed on August 25, 2003 and assigned document number N03000007475. Please refer to this number whenever corresponding with this office regarding the above corporation.

PLEASE NOTE: Compliance with the following procedures is essential to maintaining your corporate status. Failure to do so may result in dissolution of your corporation.

A corporation annual report must be filed with this office between January 1 and May 1 of each year beginning with the calendar year following the year of the filing/effective date noted above and each year thereafter. Failure to file the annual report on time may result in administrative dissolution of your corporation.

A federal employer identification (FEI) number must be shown on the annual report form prior to its filing with this office. Contact the Internal Revenue Service to insure that you receive the FEI number in time to file the annual report. To obtain a FEI number, contact the IRS at 1-800-829-3676 and request form SS-4 or by going to their website at www.irs.ustreas.gov.

Should your corporate mailing address change, you must notify this office in writing, to insure important mailings such as the annual report notices reach you.

Should you have any questions regarding corporations, please contact this office at the address given below.

Maryanne Dickey, Document Specialist Supervisor
New Filing Section Letter Number: 303A00048613