

2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000003291

FILED
Jun 29, 2013
Secretary of State

Entity Name: EMPOWERMENT FIRST INC

Current Principal Place of Business:

2981-310 PARENTAL HOME ROAD
JACKSONVILLE, FL 32216

New Principal Place of Business:

1861 RIVIERA PARKWAY
APT L-5
JACKSONVILLE, FL 32205

Current Mailing Address:

P.O. BOX 47051
JACKSONVILLE, FL 32247

New Mailing Address:

1861 RIVIERA PARKWAY
APT L-5
JACKSONVILLE, FL 32205

FEI Number: 20-1894850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREEKMORE, JAMES H
2981-310 PARENTAL HOME ROAD
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

PAULY, JOHN C
1861 RIVIERA PARKWAY
APT L-5
JACKSONVILLE, FL 32205 US

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: JOHN C. PAULY

06/29/2013

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CH
Name: PAULY, JOHN C
Address: 1861 RIVIERA PKWY APT L-5
City-St-Zip: JACKSONVILLE, FL 32205

Title: V-CH
Name: STAFFORD, BARBARA A
Address: 3539 BEACH BLVD APT 505
City-St-Zip: JACKSONVILLE, FL 32207

Title: S/T
Name: CREEKMORE, JAMES A
Address: 3539 BEACH BLVD APT 505
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: JOHN C. PAULY

DR.

06/29/2013

Electronic Signature of Signing Officer or Director

Date