2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
06 NOV 29 PM 2:47
TALLAHASSEE, FLORIDA

DOCUMENT # N04000003339

1. Entity Name
ALLEN CHAPEL A.M.E. CHURCH, INC.

Principal Place of Business	Mailing Address
208 SOUTH 3RD ST. IMMOKALEE, FL 34143	P.O. BOX 477 IMMOKALEE, FL 34143

REINSTATEMENT 2006
102920061 -CR2E099 (11/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number ☐ 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
MILLER, GERALDINE 701 SOUTH 5TH ST. IMMOKALEE, FL 34143	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $238.25
After January 1, 2007, Fee will be $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	D FREEMAN, ERNEST 324 S. 2ND ST. IMMOKALEE, FL 34142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 200082148412 11/29/06--01053--010 **245.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMS, PHYLISS F 500 B WOOD DR. IMMOKALEE, FL 34142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GERMAN, ALICE 507 DOAK AVE IMMOKALEE, FL 34143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ALLEN-STEWART, GEORGIA 410 S. 5TH ST. IMMOKALEE, FL 34142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Georgia Allen 410 S 5th Street Immokalee Fla 34142
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GERMAN, LILLIAN 324 S 2ND ST IMMOKALEE, FL 34142	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Lillian Freeman 324 S 2nd St Immokalee Fla 34142
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 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: Geraldine Miller 10/30/06 (239)657-7747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #