## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000003847

FILED Oct 19, 2009 Secretary of State

Entity Name: CHRISTIAN WOMEN JOB CORPS COMMUNITY DEVELOPMENT CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

2601 W STRONG ST 2601 W STRONG ST PENSACOLA, FL 32501 PENSACOLA, FL 32505

Current Mailing Address: New Mailing Address:

2601 W STRONG ST 2601 W STRONG ST PENSACOLA, FL 32501 PENSACOLA, FL 32505

FEI Number: 76-0755825 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

GREEN, SHEILA 1425 KINGS ROAD

CANTONMENT, FL 32533 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: SHEILA J. GREEN

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

: CHRM ( ) Delete Title: CHRM (X) Change ( ) Addition

 Name:
 JAMES, BEVERLY
 Name:
 ARNOLD, JOYCE MRS

 Address:
 518 FITZGERALD STREET
 Address:
 905 N. 65TH AVENUE

 City-St-Zip:
 PENSACOLA, FL 32505
 City-St-Zip:
 PENSACOLA, FL 32506

Title: VCHR ( ) Delete Title: VCHR (X) Change ( ) Addition Name: ROBINSON, JOHN Name: JONES, EARL MR

Address: 1901 NICOLE STREET Address: 1251 KATHLEEN STREET
City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: CANTONMENT, FL 32533

Title: SEC () Delete Title: SEC (X) Change ( ) Addition WILSON, LUNETTE HATTAWAY, CONETT MRS. Name: Name: 805 COPPER RIDGE DRIVE 13010 HARTUNG AVENUE Address: Address: City-St-Zip: PENSACOLA, FL 32533 City-St-Zip: PENSACOLA, FL 32506

Title: TREA ( ) Delete Title: TREA (X) Change ( ) Addition

 Name:
 THOMAS, CAROLYN
 Name:
 FOSTER, JANE MRS.

 Address:
 2009 BLUE SKY DRIVE
 Address:
 909 N 75TH AVENUE

 City-St-Zip:
 PENSACOLA, FL 32506
 City-St-Zip:
 PENSACOLA, FL 32506

Title: MEM () Delete Title: MEM (X) Change () Addition

Name:PAVLUS, JOHN PASTORName:PAVLUS, JOHN PASTORAddress:1417 MOONLIGHT DRIVEAddress:1417 MOONLIGHT DRIVECity-St-Zip:CANTONMENT, FL 32504City-St-Zip:CANTONMENT, FL 32533

Title: MEM () Delete Title: MEM (X) Change () Addition

 Name:
 JONES, EARL
 Name:
 WILSON, LUNETTE

 Address:
 1251 KATHLEEN AVENUE
 Address:
 805 COPPER RIDGE DRIVE

 City-St-Zip:
 CANTONMENT, FL 32533
 City-St-Zip:
 CANTONMENT, FL 32533

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHEILA J. GREEN DIR 10/19/2009

Electronic Signature of Signing Officer or Director

Date