2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT -

BIGNATURE AND TYPED OR PRINTED NAME OF

FILED DOCUMENT # N07000009389 1. Entity Name 09 JAN 23 AM 9: 06 GRACE UNITED METHODIST CHURCH OF PLANT CITY. INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1801 E CHERRY ST 1801 E CHERRY ST PLANT CITY, FL 33563 PLANT CITY, FL 33563 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01132009 REIN-NP CR2E099 (1/07) Applied For City & State City & State 4. FEI Number Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FALANY, SYLVIA 1801 E CHERRY ST Street Address (P.O. Box Number is Not Acceptable) PLANT CITY, FL 33563 City 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. 200141887652 01/23/09--01005--015 **122.50 SIGNATURE In accordance with s. 607.193(2)(b), F.S., the Make check payable to FILE NOW!!! FEE IS \$122.50 Florida Department of State corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE CHRIRMAN OF TRUSTEES ☐ Change **Addition** NAME NAME RAY COWEN STREET ADORESS STREET ADDRESS 1507 PADDOCK DR CITY-ST-ZIP CITY-ST-7IP PLANT CITY, 76 33567 TITLE MEMBER DARYL ROJERS 2909 MAYDAY DR ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP PLANT CITY, 71 33545 TITLE MEMBER Change ☐ Delete TITLE **Addition** CAROL WRIGHT 1506 West WILLIS ST NAME NAME STREET ADDRESS STREET ADDRESS CDY-ST-7P CITY-ST-ZIP PLANT CITY, 71 33543 TITLE ☐ Detete TITLE MEMBER ☐ Change Addition SYLVIA FALANY 1112 MANCY TERRACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY-ST-7P PLANT CITY 71 33563 TITLE ☐ Delete TITLE MEMBER ☐ Change **Addition** JOE BARBARNI NAME NAME STREET ADDRESS 1103 N. BRACEWELL DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY, 7L 33563 TITLE ☐ Detete TITLE MEMBER Channe Channe Addition HAL SHIFFAR NAME NAME STREET ADDRESS 1206 PALM DR STREET ADDRESS. CITY-ST-7IP CITY-ST-ZIP PLANT CITY, 74 33543 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. RRY Course. CHAIRMAN, BOARD SIGNATURE: <

OFFICER OR DIRECTOR