

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000006542

FILED  
Feb 23, 2010  
Secretary of State

**Entity Name:** ABOVE THE NATURAL FAMILY WORSHIP CENTER INC

**Current Principal Place of Business:**

4288 SLASH PINE LANE  
TALLAHASSEE, FL 32305

**New Principal Place of Business:**

11201 N 22ND ST  
65  
TAMPA, FL 33612

**Current Mailing Address:**

4288 SLASH PINE LANE  
TALLAHASSEE, FL 32305

**New Mailing Address:**

11201 N 22ND ST  
65  
TAMPA, FL 33612

**FEI Number:** 80-0219101      **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:**

BRYANT, LAWANTA D  
4288 SLASH PINE LANE  
TALLAHASSEE, FL 32305      US

**Name and Address of New Registered Agent:**

BRYANT, LAWANTA D  
11201 N 22ND ST  
65  
TAMPA, FL 33612      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:** LAWANTA DOUGLASS BRYANT

02/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** V  
**Name:** BRYANT, LEE A  
**Address:** 11201 N 22ND ST  
**City-St-Zip:** TAMPA, FL 33612 US

**Title:** VP  
**Name:** NEAL, CARLOS M  
**Address:** 4406 ATWOOD DR  
**City-St-Zip:** TAMPA, FL 33610 US

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:** LAWANTA DOUGLASS BRYANT

P

02/23/2010

Electronic Signature of Signing Officer or Director

Date