

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000007525

FILED  
Nov 11, 2009  
Secretary of State

**Entity Name:** PROFESSOR STEPHEN D. ENGLISH AND THE FELLOWSHIP, INC.

**Current Principal Place of Business:**

1425 N.E. 151 ST TERRACE  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

1425 N.E. 151 ST TERRACE  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

**FEI Number:** 32-0259308      **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:**

CROMARTIE, SABRINA  
11045 S.W. 16TH STREET, APT #210  
PEMBROKE PINES, FL 33025 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: SABRINA CROMARTIE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ENGLISH, STEPHEN D  
Address: 1425 N.E. 151 ST TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: P ( ) Delete  
Name: JOSEPH, ENOCH V  
Address: 1425 N.E. 151 ST TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: V ( ) Delete  
Name: DIRDEN, ANTRELL  
Address: 1425 N.E. 151 ST TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: T ( ) Delete  
Name: STEVENS, KENNEDY  
Address: 1425 N.E. 151 ST TERRACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SABRINA CROMARTIE

RA

11/11/2009

Electronic Signature of Signing Officer or Director

Date