## 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N08000011357

FILED May 11, 2012 Secretary of State

Entity Name: CORNISH MEMORIAL A.M.E. ZION, INC.

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

702 WHITEHEAD ST. KEY WEST, FL 33040

Current Mailing Address: New Mailing Address:

702 WHITEHEAD ST. KEY WEST, FL 33040

FEI Number: 59-2416651 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BENNETT, DARLENE
619 MICKENS LANE
KEY WEST, FL 33040 US
LEWIS, KEVIN W DR
702 WHITEHEAD ST
KEY WEST, FL 33040 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: REV. DR. KEVIN WH LEWIS 05/11/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: ST

Name: FISHER, DETRA Address: 424 COUNTY RD. City-St-Zip: KEY WEST, FL 33040

Title: TR

Name: SANDS, ROOSEVELT C JR.

Address: 311 CROSS ST.

City-St-Zip: KEY WEST, FL 33040

Title: ST

Name: GALLAGHER, PATRICIA Address: 704 WHITEHEAD ST. City-St-Zip: KEY WEST, FL 33040

Title: ST

Name: FORBES, ELLAVISE Address: 723 WHITEHEAD ST. City-St-Zip: KEY WEST, FL 33040

Title: ST

Name: BENNETT, DARLENE
Address: 619 MICKENS LANE
City-St-Zip: KEY WEST, FL 33040

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: REV. DR. KEVIN WH LEWIS PAST 05/11/2012