

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N11000004163

**FILED**  
**Dec 07, 2012**  
**Secretary of State**

**Entity Name:** CHARLOTTE COUNTY NAACP BRANCH 5093, INC.

**Current Principal Place of Business:**

429 E VIRGINIA AVE SUITE 111C  
PUNTA GORDA, FL 33950

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 512539  
PUNTA GORDA, FL 33951

**New Mailing Address:**

**FEI Number:** 36-4686021

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRYANT, DAMAION L  
429 E VIRGINIA AVE SUITE 111C  
PUNTA GORDA, FL 33950 US

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

HARRIS, HOLLY D  
429 E VIRGINIA AVE SUITE 111C  
PUNTA GORDA, FL 33950 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: HOLLY D HARRIS

12/07/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ANDERSON, REV LOUIS C JR  
Address: 23445 NELSON AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: VP  
Name: GAMBLE, JOHN H  
Address: 22103 MAMARONECK AVE  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: S  
Name: HARRIS, HOLLY D  
Address: 515 E VIRGINIA AVE  
City-St-Zip: PUNTA GORDA, FL 33950

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: HOLLY D HARRIS

SEC

12/07/2012

Electronic Signature of Signing Officer or Director

Date