

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N11000009088

**FILED**  
**Sep 20, 2013**  
**Secretary of State**

**Entity Name:** DIVINE DAILY BREAD EATERY AND HOUSING DEVELOPMENT, INC.

**Current Principal Place of Business:**

2001 SW 16TH STREET  
APT F-29  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

2001 SW 16TH STREET  
APT F-29  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

**FEI Number:** 45-2905121      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MCCRAY, NAOMI  
6836 NW 105 LANE  
ALACHUA, FL 32615 US

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

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:** MCCRAY ,NAOMI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MAVINS, PHYLISS  
**Address:** 2001 SW 16TH STREET, APT F-29  
**City-St-Zip:** GAINESVILLE, FL 32608 US

**Title:** VP  
**Name:** WARREN, JOHN  
**Address:** 1415 NE 50TH PLACE  
**City-St-Zip:** WILLISTON, FL 32696 US

**Title:** TREA  
**Name:** ALSTON-RIVERS, ROSA LEE  
**Address:** 4707 NE 15TH TERRACE  
**City-St-Zip:** GAINESVILLE, FL 32609 US

**Title:** SEC  
**Name:** WILCOX, ANTOINETTE  
**Address:** 2207 SE 16TH STREET  
**City-St-Zip:** GAINESVILLE, FL 32608 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:** WILCOX ,ANTOINETTE

SEC

09/20/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date