

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N36158

FILED
May 26, 2011
Secretary of State

Entity Name: ALLENE V. TAYLOR MEMORIAL CENTER, INC.

Current Principal Place of Business:

5790 NW 19TH AVE.
MIAMI, FL 331423028

New Principal Place of Business:

Current Mailing Address:

1855 NW 58TH ST.
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0331868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIPSON, CATHERINE
1855 NW 58TH ST.
MIAMI, FL 33142 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: CATHERINE GIPSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GIPSON, CATHERINE
Address: 1855 NW 58TH ST.
City-St-Zip: MIAMI, FL 33142

Title: VD
Name: NEAL, WENDELL DORIS
Address: 13400 NW 21ST AVENUE
City-St-Zip: MIAMI, FL 33167

Title: SD
Name: DAVIS, LILLIAN E
Address: 3261 NW 43RD TERRACE
City-St-Zip: MIAMI, FL 33142

Title: SD
Name: SMITH, MILDRED
Address: 3550 ESPLANADE WAY #8107
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: WILLIAMS, KATIE L
Address: 6530 SW 64TH AVENUE
City-St-Zip: MIAMI, FL 33143

Title: D
Name: RAYFORD, RUBY T
Address: 2011 NW 98 STREET
City-St-Zip: MIAMI, FL 33147

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: MILDRED O. SMITH

SD

05/26/2011

Electronic Signature of Signing Officer or Director

Date