2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED Feb 07, 2008 Secretary of State

DOCUMENT# N94000003981 Entity Name: NEW MOUNT ZION AFRICAN METHODIST EPISCOPAL CHURCH TALLAHASSEE, FLORIDA **INCORPORATED New Principal Place of Business: Current Principal Place of Business:** 1401 OLD BAINBRIDGE RD. TALLAHASSEE, FL 32315 **Current Mailing Address: New Mailing Address:** 1401 OLD BAINBRIDGE RD 1401 OLD BAINBRIDGE RD. TALLAHASSEE, FL 32304 TALLAHASSEE, FL 32315 FEI Number Applied For () FEI Number: 59-3346344 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: STARKS, DANIEL WILSON, QUINTON 210 LINCOLN STREET 1103 BAŚIN ST TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32301 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: QUINTON WILSON 02/07/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BRYANT, RAYMOND Name: Name: 3201 SEAWOLE DRIVE Address Addrage:

City-St-Zip:	TALLAHASSEE, FL 32312	City-St-Zip:	
Title:	T () Delete	Title:	()Change ()Addition
Name:	GILLEY, PHYLISS	Name:	
Address:	8548 BANNERMAN BLUFF DRIVE	Address:	
City-St-Zip:	TALLAHASSEE, FL 32312	City-St-Zip:	
Title:	T () Delete	Name: \Address: 2	O (X) Change () Addition
Name:	STARKS, DANIEL		WILSON, QUINTON
Address:	1103 BASIN ST.		210 LINCOLN STREET
City-St-Zip:	TALLAHASSEE, FL 32304		FALLAHASSEE, FL 32301
Title:	T () Delete	Title:	()Change ()Addition
Name:	WYNN, ELIZABETH	Name:	
Address:	2711 BLAIR STONE RD	Address:	
City-St-Zip:	TALLAHASSEE, FL 32301	City-St-Zip:	
Title:	T () Delete	Title:	()Change ()Addition
Name:	LUCAS, OLLIE	Name:	
Address:	1115 CALLOWAY STREET	Address:	
City-St-Zip:	TALLAHASSEE, FL 32304	City-St-Zip:	
Title:	T () Delete	Title:	()Change ()Addition
Name:	GAINES, IRA	Name:	
Address:	1426 VICTORIA DR.	Address:	
City-St-Zip:	TALLAHASSEE, FL 32305	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: QUINTON WILSON 0 02/07/2008