

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000006113

FILED
Jan 23, 2009
Secretary of State

Entity Name: PACE PRESBYTERIAN CHURCH, INC.

Current Principal Place of Business:

4587 WOODBINE RD.
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

4587 WOODBINE RD.
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3289074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, SHUFORD S
5691 BERRYBROOK CIRCLE
PACE, FL 32571 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: SHUFORD S. WHITE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUMMEL, DIANA
Address: 5533 OAKMONT DRIVER
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: LIGGETT, HAMP
Address: 4927 PATTOCK PL
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: PETERSON, WALLY
Address: 4815 LA CASA CIR
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: COBB, CHUCK
Address: 4834 LAUREL OAK DRIVE
City-St-Zip: PACE, FL 32571

Title: D () Delete
Name: CHETWYNDE, PAULA
Address: 4140 CINNAMON RD
City-St-Zip: PACE, FL 32571

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D. (X) Change () Addition
Name: WALKER, JON
Address: 1245 TECUMSEH CT.
City-St-Zip: PENSACOLA, FL 32514

Title: D. (X) Change () Addition
Name: REESE, WALT
Address: 7772 LAKESIDE DRIVE
City-St-Zip: MILTON, FL 32583

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MALCOMSON, BOB
Address: 5017 CRESTWOOD DR.
City-St-Zip: PACE, FL 32571

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: HARRIS, VIRGIL
Address: 5333 ROWE TRAIL
City-St-Zip: PACE, FL 32571

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: JON WALKER

D

01/23/2009

Electronic Signature of Signing Officer or Director

Date