## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N96000003217

**FILED** May 15, 2009 Secretary of State

Entity Name: FLORIDA RELIGIOUS COALITION FOR REPRODUCTIVE CHOICE, INC.

**Current Principal Place of Business:** 

9888 PENSACOLA BLVD

C/O MARY M CALLAWAY, P.A 1600 NORTH PALAFOX STREET

PENSACOLA, FL 32501

**New Mailing Address:** 

PENSACOLA, FL 32534

**New Principal Place of Business:** 

9888 PENSACOLA BLVD PENSACOLA, FL 32534

C/O STUART B. CARSON 5023 JENNY LANE PENSACOLA, FL 32507

**Current Mailing Address:** 

FEI Number Applied For ( )

KAIN, JULIE T REV

FEI Number: 59-3388507 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:

MARY M. CALLAWAY. P.A 1600 NORTH PALAFOX STREET P.O. BOX 36097 PENSACOLA, FL 32516 US

9888 PENSACOLA BLVD

US PENSACOLA, FL 32534

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: JULIE T KAIN

05/15/2009

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete BROWN, THOMAS Name: 3990 HIDDEN OAKS DRIVE Address:

City-St-Zip: PENSACOLA, FL 32504

Title: ( ) Delete WALKER, FAY D Name: Address: 328 S 61ST AVE City-St-Zip: PENSACOLA, FL 32506

Title: () Delete CARSON, STUART Name: 5023 JENNY LANE Address: City-St-Zip: PENSACOLA, FL 32507

Title: ( ) Delete Name: MONTGOMERY, PAULA 641 BONNELL DRIVE Address: City-St-Zip: PENSACOLA, FL 32503

VΡ Title: () Delete SANCHEZ, GENA Name: 886 VALLEY RIDGE RD Address: City-St-Zip: PENSACOLA, FL 32514

Title: () Delete ARMACOST, LINDA Name: Address: 3441 ACY LOWERY RD. PACE, FL 32571 City-St-Zip:

(X) Change ( ) Addition

BROWN, THOMAS Name: Address: 3990 HIDDEN OAKS DRIVE City-St-Zip: PENSACOLA, FL 32504

Title: (X) Change ( ) Addition

Name: KAIN, JULIE T Address: 9775 N LOOP RD City-St-Zip: PENSACOLA, FL 32507

Title: (X) Change ( ) Addition

JONES, FRAN Name: Address: 3495 SCENIC HWY City-St-Zip: PENSACOLA, FL 32503

Title: (X) Change ( ) Addition

Name: MONTGOMERY, PAULA 641 CONNELL DRIVE Address: City-St-Zip: PENSACOLA, FL 32503

Title: (X) Change ( ) Addition

BARNARD, ELIZABETH Name: 3440 SCHIFKO RD Address: City-St-Zip: MOLINO, FL 32577

Title: (X) Change ( ) Addition

ARMACOST, LINDA Name: Address: 3441 ACY LOWERY RD. PACE, FL 32571 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: JULIE T KAIN Ρ 05/15/2009