2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 08, 2007
Secretary of State

DOCUMENT# N96000005200

Entity Name: ST. PAUL COMMUNITY EMPOWERMENT CENTER, INC.

Current Principal Place of Business:

3738 WINTON DRIVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

3738 WINTON DRIVE
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 59-3416251 **FEI Number Applied For ( )** **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:

TUCKER, JANICE
6348 BARRY DR WEST
JACKSONVILLE, FL 32208 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: JANICE TUCKER
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: TAYLOR, BRACY
Address: 859 TORTOISE WAY
City-St-Zip: JACKSONVILLE, FL 32218

Title: D ( ) Delete
Name: DENNIS, WILLYE
Address: 3111 WOODLAWN ROAD
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete
Name: FARMER, JOHNNY
Address: 5435 ORTEGA BLUFF LN
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: GUNS, JOHN
Address: 1733 GALLAHADION COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: T ( ) Delete
Name: TUCKER, JANICE
Address: 6348 BARRY DR WEST
City-St-Zip: JACKSONVILLE, FL 32208

Title: S ( ) Delete
Name: SMITH, CORNELIUS
Address: 4113 CLYDE DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: BRACY TAYLOR C 11/08/2007
Electronic Signature of Signing Officer or Director — Date