

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000005783

**FILED**  
**Sep 09, 2011**  
**Secretary of State**

**Entity Name:** GREATER SAINT PAUL AFRICAN METHODIST EPISCOPAL CHURCH INC.

**Current Principal Place of Business:**

315 MARTIN LUTHER KING BLVD  
BOYNTON BEACH, FL 33425

**New Principal Place of Business:**

315 MARTIN LUTHER KING BLVD  
BOYNTON BEACH, FL 33435

**Current Mailing Address:**

P.O. BOX 1419  
BOYNTON BEACH, FL

**New Mailing Address:**

315 MARTIN LUTHER KING BLVD  
BOYNTON BEACH, FL 33435

FEI Number: 65-0638639

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUDSON, WILLIAMSON PASTOR  
10304 WHITE PINTO CT.  
LAKE WORTH, FL 33449 US

**Name and Address of New Registered Agent:**

ROBINSON, NATHANIEL PASTOR  
3841 STATE RD 84 APT 108  
DAVIE, FL 33312 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: NATHANIEL ROBINSON III

09/09/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SC  
Name: MCCURDY, P A  
Address: 5111 ST JOHN AVE SOUTH  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TRUS  
Name: VOCE, CLYDE  
Address: 315 MLK BLVD  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S  
Name: ODOM, EVELYN  
Address: 10304 WHITE PINTO CT.  
City-St-Zip: LAKE WORTH, FL 33449

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: P A MCCURDY

SEC

09/09/2011

Electronic Signature of Signing Officer or Director

Date