

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000000119

FILED
Sep 20, 2006
Secretary of State

Entity Name: FRENCHTOWN NEIGHBORHOOD IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

438 W BREVARD ST
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

438 W BREVARD ST
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3488542 **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:

Name and Address of New Registered Agent:

DAVIS, REGINA M
438 W BREVARD ST
TALLAHASSEE, FL 32303 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: REGINA DAVIS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAVIS, REGINA M
Address: 710 DEWEY STREET
City-St-Zip: TALLAHASSEE, FL 32304

Title: 1VC (X) Delete
Name: WHITE, ALDRIA
Address: 411 W. CAROLINA STREET
City-St-Zip: TALLAHASSEE, FL 32302

Title: 2VP () Delete
Name: ROBERTS, ANN
Address: 512 W. CAROLINA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: S () Delete
Name: WILLIAMS, ANGELA
Address: 506 N. MARTIN L. KING BLVD.
City-St-Zip: TALLAHASSEE, FL 32301

Title: T () Delete
Name: BARBER, KENNETH
Address: 1077 ROCKBROOK COURT
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: 1VP (X) Change () Addition
Name: ROBERTS, ANN
Address: 512 W. CAROLINA STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: S (X) Change () Addition
Name: ROBERTS, ANN
Address: 512 W. CAROLINA STREET
City-St-Zip: TALLAHASSEE, FL 32303

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

I hereby certify that the information supplied with this filing does not qualify for the 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: REGINA DAVIS

P

09/20/2006

Electronic Signature of Signing Officer or Director

Date