

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000004158

FILED
Nov 14, 2009
Secretary of State

Entity Name: ALLEN TEMPLE CHRISTIAN METHODIST EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

849 KISSIMMEE ST
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

849 KISSIMMEE ST
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-2855063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALL, GEORGE
421 GEORGETOWN DR
TALLAHASSEE, FL 32310 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: GEORGE HALL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARRIS, DEXTER L
Address: 1555 DELANEY DR SUITE 1906
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: HALL, GEORGE SR
Address: 421 GEORGETOWN DR
City-St-Zip: TALLAHASSEE, FL 32310

Title: T () Delete
Name: WILLIAMS, MARY F
Address: 1010 CALLOWAY ST
City-St-Zip: TALLAHASSEE, FL 32304

Title: T () Delete
Name: WYNN, FRANCES
Address: 6339 WOODVILLE HWY
City-St-Zip: TALLAHASSEE, FL 32305

Title: STEW () Delete
Name: INGRAM, EUGENE
Address: PO BOX 791
City-St-Zip: WOODVILLE, FL 32362

Title: T () Delete
Name: RAY, VIDAL D
Address: 1700 JOE LOUIS ST., APT#119
City-St-Zip: TALLAHASSEE, FL 32304

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: STEW (X) Change () Addition
Name: RAY, MICHAEL F
Address: 736 WEST VIRGINIA ST. 4
City-St-Zip: TALLAHASSEE, FL 32304

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: MICHAEL F. RAY

STEW

11/14/2009

Electronic Signature of Signing Officer or Director

Date