FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jun 16 1997 8:00am

Secretary of State

Sandra B. Mortkem

Secretary of State **DIVISION OF CORPORATIONS**

1997

1. Corporatio	MENT# 702347		(6)								
MARTIN LUTHER FOUNDATION, INC.											
*******		•									
Principal Place of Business Mailing Address						-					(B)(8/8// 184/
5150 EAST PACIFIC COAST HWY 5150 EAST PACIFIC COAST											
STE. #600		STE. #600	STE. #600								
LONG BEACH	CA 10804	LONG BEAC US	LONG BEACH CA 90804-3312			3.	Date Incorpo	rated or Qualified	3a. D	ate of Last R	eport
		_					04/27/	/1961		05/14/19	96
	lace of Business	2a. Mailing	Address			4. 1	FEI Number 59-09 3	31120			plied For
Suite, Apt.	#, etc.	Suite, A	pt. #, etc.							\$8.75	t Applicable
22		27				5. (Certificate of	Status Desired		Fee Re	
City & State		<u> </u>	City & State			ſ		npaign Financing	[-]	\$5.00	
Zip	Country	28] Zip	I	Country			Trust Fund C		r intensible	Added 1	
24	25	29		30	,		Florida Statu	tion has liability fo tes		ax uncers. ⊠No	. 199.032,
	9. Name and Address of Current	Registered Ag				10.	Name and A	ddress of New F	egistered	Agent	
				81		Servi	ces, In	nc.			
	ENTICE HALL CORPORATION SYS	STEM, INC.		82	Street Ad	Idress (P.	O. Box Num	ber is Not Accept	able)		
	AYES ST.			83		ast Pa	ark Ave	nue			
STE. #105 TALLAHASSEE FL 32301					<u> </u>						
IALLAHASSCE PL 32301					City Tallal	hagge	· a		FL	85 Zip 9	Code 301
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize								statement for the			
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	ns of Section	change was at 617 0503, Flor	utnorized b rida Statute	y the corpoi	ration's bo	pard of direc	tors. I hereby acc	epi ine apj	pointment as	registered
SIGNATURE :	Charles / Fra	IN.	-cV	acles	Bac	let	Vice	Presiden	<u>t </u>	6-9-	97
12.	Signature, typed or printed name of registered agent of OFFICERS AND	nd tile if applicable.	. (NOTE:	Registered Ag	ent signature rec			HANGES TO OFF	DATE	D DIRECTOR	S IN 12
TITLE	PD		DELETE	1.1 TITLE			2211011070	111102010 011	OLINO MA	Change	☐ Addition
NAME	JOSEPH, LAVERNE			1.2 NAME	ľ						
STREET ADDRESS	5150 E. PACIFIC COAST HWY	# 800		1.3 STAEET	T ADDRESS						ļ
CITY-ST-ZIP	LONG BEACH CA 90804	· · · · · · · · · · · · · · · · · · ·	155.555	1.4 CITY-	ST-ZIP		 -	·			
TITLE	VID	, L	DELETE	2.1 TITLE						Change	Addition
NAME STREET ADDRESS	MARGETIC, STEVE 5150 E. PACIFIC COAST HWY	#800		2.2 NAME	T ADDOCCC						}
CITY-ST-ZIP	LONG BEACH CA 90804	***************************************	`		2.3 STREET ADDRESS 2. 4 City-St-Zip					-	
TITLE	D		DELETE		3.1 TITLE			······································		Change	☐ Addition
NAME	MOORE, JEAN				3.2 NAME						
STREET ADDRESS				3.3 STREE	T ADDRESS						
CITY-ST-ZIP	LONG BEACH CA		T SELEVE	3.4. CITY-	ST-ZIP	***				T 70	
TITLE	D TONKA KAUN E	L	DELETE	4.1 TITLE	1					Change	☐ Addition
NAME STREET ADDRESS	TRINKA, JOHN E. 5150 E. PACIFIC COAST HWY	#R00		4. 2 NAME	T ADDRESS		•				
CITY-ST-ZIP	LONG BEACH CA 90804	******		4.3 STREE	1						
TITLE	SD SD		DELETE	5.1 TITLE	27 · EII					Change	Addition
NAME	LISTOE, LINDA			5.2 NAME						ý	
STREET ADDRESS	5150 E. PACIFIC COAST HWY	#600		5.3 STREET	T ADDRESS						
CITY-ST-ZIP	LÒNG BEACH CA 90804			5.4 CITY-5	ST-ZIP						
TITLE	D		DELETÉ	6.1 TITLE						Change	Addition
NAME	CHAPMAN, REX	***		6.2 NAME	- 1						
STREET ADDRESS	5150 E. PACIFIC COAST HWY	#600		6.3 STREET	f Address						

City-st-zip

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office								
or registered agent, or both, in the State Flo	•							
1a. The name of the corporation is: Martin Luther For								
1b. Date of incorporation: 4-27-61	Document number 702347							
2. The name and address of the current re The Prentice-Hall Corporation System,	egistered agent and office:							
1201 Hays Street, Suite 105, Tallahas	see, Fl 32301							
3. The name and address of the new regist (P.O. Box Not Acceptable)	tered agent and office:							
NRAI Services, Inc.								
526 East Park Avenue, Tallahassee, Florida 32301	्रेड १ १							
The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.								
Such change was authorized by resolution of an officer so authorized by the board.	duly adopted by its board of directors or by							
Quela Dula	Linda Listoe, Secretary							
SIGNATURE 1007	Typed or printed name and title							
January 22, 1997 DATE								
SIGI	PORATION AT THE PLACE DESIGNATED THE APPOINTMENT AS REGISTERED ACITY. I FURTHER AGREE TO COMPLY S RELATIVE TO THE PROPER AND COM- ND I AM FAMILIAR WITH AND ACCEPT EGISTERED AGENT. I Services, Inc. NATURE By: C. Baclet, (Registered Agent) Vice President							
DAT								

CR2E045 (7-91)

FILING FEE: \$35.00