2000 UNIFORM BUSINESS REPORT (UBR)

9/18/00-90044-042-$70.00-$70.00

DOCUMENT # 712633

1. Entity Name

BETHUNE-COOKMAN COLLEGE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -2 AM 10:27

Principal Place of Business	Mailing Address
640 Dr. Mary McLeod Bethune Blvd. Daytona Beach, FL 32114-3099	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
same as above	same as above
Suite, Apt. #, etc.: n/a	Suite, Apt. #, etc.: n/a
City & State: same as above	City & State: same as above
Zip: same as above Country: USA	Zip: same as above Country:

4. FEI Number: 590704726 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Vice President for Fiscal Affairs E. Dean Montgomery 640 Dr. Mary McLeod Bethune Blvd. Daytona Beach, Florida	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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: E. Dean Montgomery 9/26/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to: Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President for Fisc. Aff. E. Dean Montgomery 640 Dr. Mary M. Bethune Blvd. Daytona Beach, FL 32114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Associate V.P. Fiscal Aff. Kirit B. Patel 640 Dr. Mary M. Bethune Blvd. Daytona Beach, FL 32114	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Dr. Oswald P. Bronson, Sr. 640 Dr. Mary M. Bethune Blvd. Daytona Beach, FL 32114	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Trustee Kathleen Rydell 2911 Safe Harbor Drive Tampa, FL 33618	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Trustee-Board Chairman Dr. Wendell P. Holmes, Jr. 640 Dr. Mary M. Bethune Blvd.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Trustee Mary Alice Massey 6750 Epping Forrest Way,N. #106 Jacksonville, FL 32207	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E037 (9/99)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 9/14/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #