2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001857

FILED Apr 15, 2009 Secretary of State

Entity Name: BLACKAMERICAWEB.COM RELIEF FUND, INC.

Current Principal Place of Business: New Principal Place of Business: 13760 NOEL ROAD, SUITE 750 DALLAS, TX 75240 **Current Mailing Address: New Mailing Address:** P.O. BOX 2076 ADDISON, TX 750012076 FEI Number: 20-3392672 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. STE A TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CHRM () Delete () Change () Addition JOYNER, THOMAS E Name: Name: 1321 COTTONWOOD VALLEY CIRCLE NORTH Address: Address: City-St-Zip: IRVING, TX 75038 City-St-Zip: Title: **VCHR** () Delete Title: **VCHP** (X) Change () Addition JOYNER, OSCAR Name: JOYNER, OSCAR Name: Address: 540 LAYTON DRIVE Address: 540 LAYTON DRIVE City-St-Zip: COPPELL, TX 75019 City-St-Zip: COPPELL, TX 75019 Title: (X) Delete Title: () Change () Addition WHITHERSPOON, KATRINA Name: Name: Address: 1428 YARDLEY PLACE Address: City-St-Zip: **DESOTO, TX 75115** City-St-Zip: Title: () Delete Title: () Change () Addition Name: WEST, ROYCE Name: 1305 GREENHILLS COURT Address: Address: City-St-Zip: DUNCANVILLE, TX 75137 City-St-Zip: Title: () Delete Title: (X) Change () Addition BRANNON, JANYCE BRANNON, JANYCE Name: Name: 8040 FRANKFORD ROAD #415 4000 PARKSIDE CENTER BLVD. UNIT 703 Address: Address: City-St-Zip: DALLAS, TX 75244 City-St-Zip: DALLAS, TX 75252 Title: (X) Delete Title: () Change () Addition BRAZILE, DONNA Name: Name: Address: 804 A STREET NW Address: WASHINGTON, DC 20002 City-St-Zip: 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: THOMAS E. JOYNER CHMN 04/15/2009