

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 07, 2012
Secretary of State

DOCUMENT# N42178

Entity Name: AFRICAN AMERICAN CLUB PASCO COUNTY INC.**Current Principal Place of Business:**6105 PINE HILL ROAD
PORT RICHEY, FL 34668 US**New Principal Place of Business:****Current Mailing Address:**P.O. 45
PORT RICHEY, FL 34673 US**New Mailing Address:****FEI Number:** 59-3046591 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SACHS, DORETHIA G TREA.
6105 PINE HILL ROAD
PORT RICHEY, FL 34668 US**Name and Address of New Registered Agent:**STEVENSON, DARRYLL SR.
6105 PINE HILL ROAD
PORT RICHEY, FL 34668 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: DARRYLL STEVENSON SR

11/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: STEVENSON, DARRYLL SR.
Address: P.O. BOX 45
City-St-Zip: PORT RICHEY, FL 34673 US

Title: V.P.
Name: LEWIS, MARY LU
Address: P.O BOX 45
City-St-Zip: PORT RICHEY, FL 34673 US

Title: SECT
Name: CALLAGHAN, DANIEL
Address: P.O.BOX 45
City-St-Zip: PORT RICHEY, FL 34673 US

Title: TREA
Name: STEVENSON, LATRICIA
Address: P.O. BOX 45
City-St-Zip: PORT RICHEY, FL 34673 US

I hereby 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 all other like empowered.

SIGNATURE: DARRYLL STEVENSON SR.

PRES

11/07/2012

Electronic Signature of Signing Officer or Director

Date