

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N46540** (3)

1. Corporation Name

AFRICAN AMERICAN CULTURAL SOCIETY INC.



Principal Place of Business

Mailing Address

**15 PICKWOOD PLACE
PALM COAST FL 32137**

**15 PICKWOOD PLACE
PALM COAST FL 32137**

3. Date Incorporated or Qualified

12/19/1991

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 **POST OFFICE BOX 350607**

4. FEI Number

59-3104305

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

27 **PALM COAST, FL**

Zip

Country

Zip

Country

24 **25** **29** **32135-0607**

30 **FLAGLER**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOLDER, LIONEL
70 BAYSIDE DRIVE
PALM COAST FL 32137**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **MAUQE, CHARENCE A.**
STREET ADDRESS **42 BRIGADOON LANE**
CITY-ST-ZIP **PALM COAST FL**

TITLE **SD** ☒ DELETE

NAME **SMITH, JEANETTE**
STREET ADDRESS **15 PICKWOOD PLACE**
CITY-ST-ZIP **PALM COAST FL**

TITLE **TD** ☐ DELETE

NAME **BOONE, WALTER**
STREET ADDRESS **103 BRUSHWOOD LANE**
CITY-ST-ZIP **PALM COAST FL**

TITLE **D** ☒ DELETE

NAME **ALLEYNE, ROBERT**
STREET ADDRESS **59 WEST ROBIN LN**
CITY-ST-ZIP **PALM COAST FL**

TITLE **D** ☐ DELETE

NAME **BETHEL, RICHARD T.**
STREET ADDRESS **2 COTTONWOOD CT.**
CITY-ST-ZIP **PALM COAST FL**

TITLE **D** ☐ DELETE

NAME **BROOKS, ROBERT**
STREET ADDRESS **103 POINT PLEASANT DR.**
CITY-ST-ZIP **PALM COAST FL**

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PD ☐ Change ☐ Addition

MAUQE, CLARENCE A.

**42 BRIGADOON LANE
PALM COAST, FL 32137**

☐ Change ☒ Addition

**SD
DOROTHY G. ROBINSON
35 BALLARD LANE**

PALM COAST FL 32137 ☐ Change ☐ Addition

☐ Change ☒ Addition

**D
JACQUELINE BROWNE
63 WELLSSTREAM LANE
PALM COAST, FL 32164**

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Clarence A. Mauqe* **CLARENCE A. MAUQE** 2/1/96 (904) 445-6023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)