

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000005857

FILED
Mar 23, 2002 8:00 AM
Secretary of State

Entity Name: LINCOLN HIGH SCHOOL ALUMNI ASSOCIATION, INCORPORATED

Current Principal Place of Business:

6423 NW 42ND LANE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5915
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-3415026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, ALBERT E
6423 N.W. 42ND LANE
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MILLS, CLARENCE
Address: 1610 NE 19TH PLACE
City-St-Zip: GAINESVILLE, FL 32609

Title: DV () Delete
Name: WHITE, ALBERT E
Address: 6423 NW 42ND LANE
City-St-Zip: GAINESVILLE, FL 32606

Title: SD () Delete
Name: RODRIGUEZ, LILLIAN J
Address: 1226 NE 16TH PLACE
City-St-Zip: GAINESVILLE, FL 32609

Title: TD () Delete
Name: WILLIAMS, EARL M
Address: 308 NW 53RD TERR
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: TERRY, JERALINE
Address: 818 NE 26TH TERR
City-St-Zip: GAINESVILLE, FL 32641

Title: D () Delete
Name: ROBBINS, BLANCHE J
Address: 727 NW 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALBERT E. WHITE

DV

03/23/2002

Electronic Signature of Signing Officer or Director

_____ Date