

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005857

FILED  
Mar 12, 2005  
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: D      (X) Change ( ) Addition  
Name: BELLAMY, LUCILLE  
Address: 819 NE 26TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32641

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

03/12/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date