

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002964

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** FLORIDA CIVIL RIGHTS ASSOCIATION, INC.

**Current Principal Place of Business:**

750 SOUTH ORANGE BLOSSOM TRAIL  
SUITE 273  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 593248  
ORLANDO, FL 32859

**New Mailing Address:**

**FEI Number:** 84-1675341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID, J WILLIE III  
750 SOUTH ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805 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: DP  
Name: DAVID, III, J WILLIE  
Address: P O BOX 593248  
City-St-Zip: ORLANDO, FL 32859

Title: DS  
Name: RANDOLPH, LA-ZONDRA  
Address: P O BOX 593248  
City-St-Zip: ORLANDO, FL 32859

Title: D  
Name: DOLCE, JULINA  
Address: P O BOX 593248  
City-St-Zip: ORLANDO, FL 32859

Title: DT  
Name: WASHINGTON, TAMMI  
Address: P O BOX 593248  
City-St-Zip: ORLANDO, FL 32859

Title: D  
Name: STOWE, HENRY  
Address: P.O. BOX 593248  
City-St-Zip: ORLANDO,, FL 32859

Title: D  
Name: TOWNSEND, DAISY  
Address: P.O. BOX 593248  
City-St-Zip: ORLANDO, FL 32859

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: J WILLIE DAVID, III

DP

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date