2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721723

Entity Name: NATIONAL ALUMNI ASSOCIATION OF BETHUNE-COOKMAN

UNIVERSITY, INCORPORATED

Current Principal Place of Business:

558 OAK STREET

DAYTONA BEACH, FL 32114

Current Mailing Address:

P.O. BOX 11646

DAYTONA BEACH, FL 32120 US

FEI Number: 07-0006706 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHNSON-YOUNG, GLEANDEAL 558 OAK STREET DAYTONA BEACH, FL 32114 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: GLEANDEAL JOHNSON-YOUNG

02/26/2017

FILED Feb 26, 2017

Secretary of State

CC5501915697

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title VP

NameADAMS, JENNIFER LNameCARMEN, WILLIAMSONAddress1172 JESSAMINE LAKE COURTAddress180 POINT O WOODS DRIVECity-State-Zip:ORLANDO FL 32839City-State-Zip:DAYTONA BEACH FL 32114

Title EXECUTIVE SECRETARY Title TREASURER

Name MORGAN, ASHLEY Name JOHNSON-YOUNG, GLEANDEAL

Address 2567 MIMOSA CIRCLE Address 1297 B GREEN ROAD

City-State-Zip: JACKSONVILLE FL 32209 City-State-Zip: BOSTON GA 31626

Title CORRESPONDING SECRETARY Title TRUSTEE

NameLOPER, JONEVANameDAVIS, WAYNEAddress104 TUSCANY CHASE DRIVEAddressP.O. BOX 11646

City-State-Zip: DAYTONA BEACH FL 32117 City-State-Zip: DAYTONA BEACH FL 32120

Title PARLIMENTARIAN Title CHAPLAIN

Name WALKER-BLAND, CYNTHIA Name BURNS, OBBIE
Address 7083 PRI IDV I ANIE Address 5692 REYNARD

Address 7083 DRURY LANE Address 5692 REYNARD TRAIL
City-State-Zip: ORLANDO FL 33018 City-State-Zip: LITHONIA GA 30038

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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: GLEANDEAL JOHNSON-YOUNG

TREASURER

02/26/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title PUBLIC RELATIONS
Name THREET, DEBORRAH

Address 702 SE BREAKWATER AVENUE
City-State-Zip: PORT ST. LUCIE FL 34983