

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721723

Entity Name: NATIONAL ALUMNI ASSOCIATION OF BETHUNE-COOKMAN UNIVERSITY, INCORPORATED

FILED
Feb 17, 2020
Secretary of State
4338146823CC

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: 59-2344490

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DELANCY, ROBERT
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: ROBERT DELANCY

02/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DELANCY, ROBERT
Address P.O. BOX 11646
City-State-Zip: DAYTONA BEACH FL 32120

Title VP
Name GWENDOLYN, ANDERSON
Address 132 59TH AVENUE SOUTH
City-State-Zip: ST. PETERBURG FL 33705

Title EXECUTIVE SECRETARY
Name BROWN-TATE, LAKEECHA
Address 3913 E. LAKE PLACE
City-State-Zip: MIRAMAR FL 33023

Title CORRESPONDING SECRETARY
Name WILLIAMSON, CARMEN
Address P.O. BOX 11646
City-State-Zip: DAYTONA BEACH FL 32120

Title TREASURER
Name COOPER, SHARON J
Address 10 NE 131ST STREET
City-State-Zip: NORTH MIAMI FL 33161

Title CHAPLAIN
Name SANDERS, GINA
Address 1202 TUXFORD DRIVE
City-State-Zip: BRANDON FL 33511

Title PUBLIC RELATIONS
Name THREET, DEBORRAH
Address 702 SE BREAKWATER AVENUE
City-State-Zip: PORT ST. LUCIE FL 34983

Title ALUMNI TRUSTEE
Name SHORTER, MICHAEL
Address 7098 N. W. 49TH COURT
City-State-Zip: LAUDERHILL FL 33319

Continues on page 2

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: SHARON J. COOPER

TREASURER

02/17/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PARLIAMENTARIAN
Name MCCRAY, JOHNNIE
Address P.O. BOX 11646
City-State-Zip: DAYTONA BEACH FL 32120