

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721723

Entity Name: DR. MARY MCLEOD BETHUNE NATIONAL ALUMNI ASSOCIATION INC.**Current Principal Place of Business:**321 DAHOON HOLLY DRIVE
DAYTONA BEACH, FL 32117**Current Mailing Address:**5460 N OCEAN DR
APT 12B SUITE 12B
RIVIERA BEACH, FL 33404 US**FEI Number: 59-2344490****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCRAY, JOHNNY
5460 N OCEAN DR
SUITE 12B
RIVIERA BEACH, FL 33404 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:** JOHNNY MCCRAY, JR. ESQUIRE**04/23/2023**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	MCCRAY, JOHNNY
Address	1219 HIBISCUS AVENUE
City-State-Zip:	POMPANO BEACH FL 33062

Title	VP
Name	SHORTER, MICHAEL
Address	7098 NW 49TH ST
City-State-Zip:	LAUDERHILL FL 33319

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

Title	TREASURER
Name	STARKS, LAVAUGHN G
Address	5460 N OCEAN DR SUITE 12B
City-State-Zip:	RIVIERA BEACH FL 33404

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

Title	SV
Name	WILLIAMS, CLAIRE
Address	321 DAHOON HOLLY DRIVE
City-State-Zip:	DAYTONA BEACH FL 32117

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: LAVAUGHN STARKS**TREASURER****04/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date