

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742601

Entity Name: A.M.E. HOUSING AGENCY OF FLORIDA, INC.

Current Principal Place of Business:

9050 NORFOLK BLVD.
JACKSONVILLE, FL 32208

Current Mailing Address:

9050 NORFOLK BLVD.
JACKSONVILLE, FL 32208 US

FEI Number: 59-1846324

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHARDSON, ADAM J JR.
9050 NORFOLK BLVD.
JACKSONVILLE, FL 32208 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: ADAM J. RICHARDSON, JR.

01/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name RICHARDSON, ADAM J JR.
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title SECRETARY
Name PRIER, PAMELA
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title VP
Name GIBBS, CRAIG
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title TREASURER
Name RUTLAND, AL
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title DIRECTOR
Name MOORE, JOHNETTA
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title DIRECTOR
Name SCOTT, KIM
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

Title DIRECTOR
Name RICHARDSON, CONNIE
Address 9050 NORFOLK BLVD.
City-State-Zip: JACKSONVILLE FL 32208

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: ADAM J. RICHARDSON, JR.

PRESIDENT

01/25/2021

Electronic Signature of Signing Officer/Director Detail

Date