2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000789

Entity Name: WILKIE D. FERGUSON, JR. BAR FOUNDATION, INC.

FILED Jun 23, 2020 **Secretary of State** 2687964556CC

Current Principal Place of Business:

936 SW 1ST AVE. MAILBOX 361 MIAMI, FL 33130

Current Mailing Address:

936 SW 1ST AVE MAILBOX 361 MIAMI, FL 33130 US

FEI Number: 20-2236545 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RANDOLPH, TRELVIS 936 SOUTHWEST 1ST AVENUE MAILBOX 361 MIAMI, FL 33130 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: TRELVIS RANDOLPH 06/23/2020

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title D

RANDOLPH, TRELVIS ESQ. Name Name LOMAX, CHRISTOPHER ESQ.

9120 DADELAND BLVD 936 SW 1ST AVE. Address Address

SUITE 1400 MAILBOX 361

City-State-Zip: MIAMI FL 33156 City-State-Zip: MIAMI FL 33130

Title D Title D

Name ARSCOTT, LOREAL ESQ. Name JEFFERSON, CHANEL

Address 936 SW 1ST AVE. Address 936 SW 1ST AVE.

> MAILBOX 361 MAILBOX 361

MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

City-State-Zip:

Title DIRECTOR Title DIRECTOR

JOHN, ELROY ESQ. SMITH, KEYLA ESQ. Name Name

936 SW 1ST AVE. 936 SW 1ST AVE. Address Address MAILBOX 361 MAILBOX 361

City-State-Zip: MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

DIRECTOR Title

Address

Name WOOD, CHANAE L ESQ.

> 936 SW 1ST AVE. MAILBOX 361

MIAMI FL 33130 City-State-Zip:

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.

06/23/2020 SIGNATURE: TRELVIS RANDOLPH **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date