

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N06000002135

Entity Name: FLORIDA CLASSIC CONSORTIUM CORPORATION

FILED
Jul 18, 2022
Secretary of State
2581635726CC

Current Principal Place of Business:

FLORIDA A&M UNIVERSITY
400 LEE HALL
TALLAHASSEE, FL 32307

Current Mailing Address:

FLORIDA A&M UNIVERSITY
400 LEE HALL
TALLAHASSEE, FL 32307

FEI Number: 51-0572825

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS, SHIRA R ESQ
FLORIDA A&M UNIVERSITY
300 LEE HALL
TALLAHASSEE, FL 32307 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: SHIRA R THOMAS

07/18/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DCC
Name ROBINSON, LARRY
Address FLORIDA A&M UNIVERSITY - 400 LEE HALL
City-State-Zip: TALLAHASSEE FL 32307

Title DCC
Name DRAKE, LAWRENCE
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title DT
Name WALKER, GLORIA
Address FLORIDA A&M UNIVERSITY-100 LEE HALL
City-State-Zip: TALLAHASSEE FL 32307

Title DIRECTOR
Name SMITH, MICHAEL
Address FLORIDA A&M UNIVERSITY 1835 WAHNSH WAY
City-State-Zip: TALLAHASSEE FL 32307

Title DIRECTOR
Name THEUS, REGINALD
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR
Name BEARDEN, KAREN
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR
Name JOHNSON, CURTIS
Address FLORIDA A&M UNIVERSITY 400 LEE HALL
City-State-Zip: TALLAHASSEE FL 32307

Title DIRECTOR
Name CUMMINGS, CARMEN
Address FLORIDA A&M UNIVERSITY 400 LEE HALL
City-State-Zip: TALLAHASSEE FL 32307

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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: LARRY ROBINSON

DIRECTOR

07/18/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ADAMS, JENNIFER
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR
Name WOODARD, KIMBERLY
Address 640 DR MARY MCLEOD BETHUNE BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title DIRECTOR
Name FRIDAY-STROUD, SHAWNTA
Address FLORIDA A&M UNIVERSITY
FOUNDATION
625 E. TENNESSEE STREET SUITE
100
City-State-Zip: TALLAHASSEE FL 32308