Entity Name: MARION COUNTY'S DR. MARTIN LUTHER KING, JR. COMMEMORATIVE COMMISSION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

11231 SW 50TH AVENUE OCALA, FL 34476

### **Current Mailing Address:**

DOCUMENT# N07000011697

P.O. BOX 171 OCALA, FL 34478 US

### FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

BETHEA, IRE J 2657 NW 27TH AVE OCALA, FL 34475 US

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

## Officer/Director Detail :

	Title	Ρ	Title	VP
	Name	BETHEA, IRE J	Name	LEAHMON, PAULA
	Address	2657 NW 27TH AVE	Address	1714 SW 3RD STREET
	City-State-Zip:	OCALA FL 34475	City-State-Zip:	OCALA FL 34471
				_
	Title	S	Title	T
	Title Name	S RICHARDSON, DEBRA	Title Name	T RICHARDSON, SHARON
				T RICHARDSON, SHARON 3363 NE 32ND AVE
	Name	RICHARDSON, DEBRA	Name	

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 RICHARDSON

TREASURER

04/25/2017

Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 25, 2017 Secretary of State CC4663352323