

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N07084

**Entity Name:** THE LINCOLN-DOUGLASS-MEMORIAL EMANCIPATION  
PROCLAMATION ASSOCIATION, INC.

**Current Principal Place of Business:**

9378 ARLINGTON EXPRESSWAY  
186  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

12919 OAKLAND HILLS COURT  
JACKSONVILLE, FL 32225 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILLIAMS, REV. DAVID  
9378 ARLINGTON EXPRESSWAY  
186  
JACKSONVILLE, FL 32225 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:** REV. DAVID WILLIAMS

10/24/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name WILLIAMS, REV. DAVID  
Address 9378 ARLINGTON EXPRESSWAY  
186  
City-State-Zip: JACKSONVILLE FL 32225

Title TREASURER  
Name DEGELE, DENNIS  
Address 2342 BETSY DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

Title 2VPD  
Name ADAMS, LOUIS  
Address 5221 PORTSMOUTH AVENUE  
City-State-Zip: JACKSONVILLE FL 32208

Title VP  
Name FLOWERS, ROBERT  
Address 6720 WEST VIRGINIA COURT  
City-State-Zip: JACKSONVILLE FL 32209

Title SD  
Name MATHIS, DENISE  
Address 12919 OAKLAND HILLS COURT  
City-State-Zip: JACKSONVILLE FL 32225

*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:** DENISE MATHIS

**SECRETARY**

10/24/2019

Electronic Signature of Signing Officer/Director Detail

Date