

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005650

FILED
Apr 29, 2019
Secretary of State
9812807779CC

Entity Name: AFRICAN AMERICAN COLLEGIATE & YOUTH GOLFERS HALL OF FAME, INC.

Current Principal Place of Business:

1032 CENTER STONE LANE
RIVIERA BEACH,, FL 33404

Current Mailing Address:

PO BOX 31901
PALM BEACH GARDENS,, FL 33420

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KNOWLES, ESMERALDA H
1032 CENTER STONE LANE
RIVIERA BEACH, FL 33404 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name KNOWLES, MALACHI
Address 1032 CENTER STONE LANE
City-State-Zip: RIVIERA BEACH FL 33404

Title VP
Name BLANCO, NORMAN F.
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title TREASURER
Name KNOWLES, ESMERALDA H
Address 1032 CENTER STONE LANE
City-State-Zip: RIVIERA BEACH FL 33404

Title SECRETARY
Name DAVIS, DARIUS A.
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title DIRECTOR
Name BOGER, ERNEST P. PHD
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title DIRECTOR
Name BOOKER, EVETTE
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title DIRECTOR
Name BIZZLE, MILES CHRISTOPHER
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title DIRECTOR
Name JONES, TIANA JALISA CORRINE
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Continues on page 2

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: MALACHI KNOWLES

PRESIDENT

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PHIPPS, II, ANTHONY
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS, FL 33420

Title DIRECTOR
Name DENT, JOSEPH SAMUEL
Address 1032 CENTER STONE LANE
City-State-Zip: RIVIERA BEACH, FL 33404

Title DIRECTOR
Name WALLER, LAUREN
Address PO BOX 31901
City-State-Zip: PALM BEACH GARDENS FL 33420