

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000000208

Entity Name: BLACK MEN'S HEALTH FOUNDATION, INC.

Current Principal Place of Business:

914 RAILROAD AVE STE 6
TALLAHASSEE, FL 32310

Current Mailing Address:

914 RAILROAD AVE STE 6
TALLAHASSEE, FL 32310 US

FEI Number: 86-1643150

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIKER, JACK E III
2010 DELTA BLVD
TALLAHASSEE, FL 32303 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: JACK E KIKER, III

01/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name BROWN, JON D.
Address 914 RAILROAD AVENUE, SUITE 6
City-State-Zip: TALLAHASSEE FL 32310

Title TREASURER
Name BROWN, LETITIA T.
Address 914 RAILROAD AVENUE, SUITE 6
City-State-Zip: TALLAHASSEE FL 32310

Title SECRETARY
Name WILLIAMS, GERALD
Address 914 RAILROAD AVENUE, SUITE 6
City-State-Zip: TALLAHASSEE FL 32310

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: JON D. BROWN

CHAIRMAN

01/30/2025

Electronic Signature of Signing Officer/Director Detail

Date