## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25984

Entity Name: BLACK ON BLACK CRIME TASK FORCE GAINESVILLE,

ALACHUA COUNTY, INC.

**Current Principal Place of Business:** 

423 NW 6TH PLACE GAINESVILLE, FL 32601

**Current Mailing Address:** 

POST OFFICE BOX 5565 GAINESVILLE, FL 32601

FEI Number: 59-3369794 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELLIS, LARRY T 4413 NW 51 DRIVE GAINESVILLE, FL 32606 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: LARRY T. ELLIS 03/10/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title VC

NameWILLIAMS, ROSA BNameWHITE, ALBERTAddress423 NW 6TH PLACEAddress6423 NW 42ND LANE

City-State-Zip: GAINESVILLE FL 32601 City-State-Zip: GAINESVILLE FL 32606

Title **TREASURER** Title **SECRETARY** Name HOLT, DEBORAH Name DOUALEHI, AHIPO Address **4601 SW 20 TERRACE** Address 1704 SE 4 AVENUE City-State-Zip: GAINESVILLE FL 32641 City-State-Zip: GAINESVILLE FL 32603

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: ROSA B. WILLIAMS

Electronic Signature of Signing Officer/Director Detail

**CHAIR** 

03/10/2019 Date

FILED Mar 10, 2019

**Secretary of State** 

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