2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46540

Entity Name: AFRICAN AMERICAN CULTURAL SOCIETY INC.

Current Principal Place of Business:

4422 US HIGHWAY 1 NORTH PALM COAST, FL 32137

Current Mailing Address:

P.O. BOX 350607 PALM COAST, FL 32135-0607 US

FEI Number: 59-3104305

Name and Address of Current Registered Agent:

KRAUSE, VICTOR 114 NORTH LAKEWALK DRIVE PALM COAST, FL 32137 US

Certificate of Status Desired: Yes

FILED Apr 07, 2016

Secretary of State

CC6775051733

Date

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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 :

Olliool/Dire			
Title	PRESIDENT	Title	DIRECTOR
Name	MATTHEWS, JOSEPH	Name	WHITING, ROBERT
Address	P.O. BOX 351343	Address	54 FRONT STREET
City-State-Zip:	PALM COAST FL 32135	City-State-Zip:	PALM COAST FL 32137
Title	DIRECTOR	Title	DIRECTOR
Name	TANNER, JEAN M	Name	CAMPBELL, DORA
Address	6 TUCKAHOE WAY	Address	32 WOODFAIR LANE
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164
Title	DIRECTOR	Title	TREASURER
Title Name	DIRECTOR WILLIAMS, G. HENRY	Title Name	TREASURER SWIRE, HOPE A
Name	WILLIAMS, G. HENRY P.O. BOX 2706	Name	SWIRE, HOPE A 85 FELWOOD LANE
Name Address City-State-Zip: Title	WILLIAMS, G. HENRY P.O. BOX 2706 PALM COAST FL 32203 DIRECTOR	Name Address	SWIRE, HOPE A 85 FELWOOD LANE
Name Address City-State-Zip: Title Name	WILLIAMS, G. HENRY P.O. BOX 2706 PALM COAST FL 32203 DIRECTOR ROBINSON, STEPHANIE E.	Name Address City-State-Zip: Title	SWIRE, HOPE A 85 FELWOOD LANE PALM COAST FL 32137 VP, 1ST
Name Address City-State-Zip: Title	WILLIAMS, G. HENRY P.O. BOX 2706 PALM COAST FL 32203 DIRECTOR ROBINSON, STEPHANIE E. 2 BUTTERNUT DRIVE	Name Address City-State-Zip: Title Name	SWIRE, HOPE A 85 FELWOOD LANE PALM COAST FL 32137 VP, 1ST DODSON-LUCAS, SYBIL

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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: EDMUND G. PINTO, JR.

CHAIRMAN

04/07/2016

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	CHAIRMAN
Name	PINTO, EDMUND G. JR.
Address	1 ERIC PLACE
City-State-Zip:	PALM COAST FL 32164