

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743075

FILED
Apr 14, 2009
Secretary of State

Entity Name: MARTIN LUTHER KING, JR. COMMISSION OF FLORIDA, INC.

Current Principal Place of Business:

1712 NE WALDO ROAD
GAINESVILLE, FL 32609 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2092
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-1932327

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, RODNEY
3609 NE 156TH AVE
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LONG, RODNEY
Address: 3609 NE 156TH AVENUE
City-St-Zip: GAINESVILLE, FL 32609

Title: VPD () Delete
Name: MCGRAW, DIYONNE
Address: 4331 NW 21 TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: ED () Delete
Name: SMALL, MARIE
Address: 1625 SE 12 AVENUE
City-St-Zip: GAINESVILLE, FL 32641

Title: SD () Delete
Name: RAMSEUR, DORCAS
Address: 1020A NE 2ND ST
City-St-Zip: GAINESVILLE, FL

Title: T () Delete
Name: NIX-JOHNSON, JANICE
Address: 6114 SE COUNTY RD 234
City-St-Zip: GAINESVILLE, FL

Title: H () Delete
Name: BUCHANAN, JOEL
Address: 110 SE 14 LANE
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: NIX-CREWS, JANICE
Address: 6114 SE COUNTY RD 234
City-St-Zip: GAINESVILLE, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JANICE NIX CREWS

T

04/14/2009

Electronic Signature of Signing Officer or Director

Date