

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754846

1. Entity Name

THE FLORIDA AFRICAN-AMERICAN STUDENT ASSOCIATION

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90005 023 ****61.25

Principal Place of Business

3526 14TH AVE SOUTH
ST PETERSBURG FL 33711

Mailing Address

3526 14TH AVE SOUTH
ST PETERSBURG FL 33711

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2086242

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional -
Fee Required

6. Name and Address of Current Registered Agent

JOHNS, CHARLOTTE
3526 14TH AVE SOUTH
ST PETERSBURG FL 33711

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☒ Delete
NAME JOHNSON, JOSEPHINE S
STREET ADDRESS 50 CANTERBERRY LANE
CITY-ST-ZIP FT LAUDERDALE FL 33311

TITLE DV ☒ Delete
NAME JENNINGS SCHENCK, JOHNDRE
STREET ADDRESS 7933 COURTNEY TERRACE #A
CITY-ST-ZIP HOBE SOUND FL

TITLE DV ☒ Delete
NAME ULYSSEE, STEDMOND
STREET ADDRESS 1781 NW 20TH STREET
CITY-ST-ZIP SUNRISE FL 33313

TITLE DV ☒ Delete
NAME SMALL, TYVI II
STREET ADDRESS 4202 E FOWLER AVE
CITY-ST-ZIP TAMPA FL 33620

TITLE DAC ☒ Delete
NAME TRAPP, JEROME
STREET ADDRESS 8250 N.W. 14TH AVE
CITY-ST-ZIP MIAMI FL 33147

TITLE ACED ☐ Delete
NAME BIRDSONG, ANN
STREET ADDRESS 1206 N PARK RD
CITY-ST-ZIP PLANT CITY FL 33566

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Hunter, Jacqueline
STREET ADDRESS 6424 Dawson Street
CITY-ST-ZIP Hollywood, FL 33023

TITLE DV ☒ Change ☐ Addition
NAME Tolbert, Raveen
STREET ADDRESS 1012 E. Tunis Street
CITY-ST-ZIP Pensacola, FL 32503

TITLE DV ☒ Change ☐ Addition
NAME Speed, Cassandra
STREET ADDRESS 895 Forrest Drive
CITY-ST-ZIP Bartow, FL 33830

TITLE TD ☒ Change ☐ Addition
NAME Richardson, Michelle
STREET ADDRESS 505 South Lake Street
CITY-ST-ZIP Plant City, FL 33566

TITLE DE-elect ☒ Change ☐ Addition
NAME Cleveland, Donald
STREET ADDRESS 3501 SW Davie Road
CITY-ST-ZIP Davie, FL 33314

TITLE DC (Title Change) ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)