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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90084 048 \*\*\*\*75.00

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1. Corporation Name

ASSOCIATION OF AM AND FM LODGES, INCORPORATED

Principal Place of Business

3670 MIMOSA DRIVE  
P.O. BOX 1605  
JACKSONVILLE FL 32207

Mailing Address

3670 MIMOSA DRIVE  
P.O. BOX 1605  
JACKSONVILLE FL 32207



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

03/06/1981

4. FEI Number

59-2177147

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

JAMES, ROOSEVELT  
3670 MIMOSA DRIVE  
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE SDF ☐ DELETE

NAME JAMES, ROOSEVELT A.

STREET ADDRESS 3670 MIMOSA DR  
CITY-ST-ZIP JACKSONVILLE FL 32205

TITLE D ☒ DELETE

NAME SALEEM, SAAD R.

STREET ADDRESS 1028 TURTLE CREEK DR  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE D ☐ DELETE

NAME MARTIN, JAMES A.

STREET ADDRESS 1144 BERTHA ST  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE D ☐ DELETE

NAME WATKINS, JOHNNY L.

STREET ADDRESS 1320 HOGAN CREEK TOWER, APT 1006  
CITY-ST-ZIP JACKSONVILLE FL 32218

TITLE VPT ☐ DELETE

NAME SCOTT, EDNA

STREET ADDRESS 605 TALBOT AVE.  
CITY-ST-ZIP JACKSONVILLE FL 32205

TITLE P ☐ DELETE

NAME WRIGHT, GEORGE

STREET ADDRESS 3539 SPRING PARK RD  
CITY-ST-ZIP JACKSONVILLE FL 32207

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D. BISHOP, NATMANIE BROWN.  
26771 S.W. 125 AVE.  
MIAMI FLORIDA 32033 LODGE #003

D. ALEXANDER F. ROSS:  
IMHOTEP TEMPLE LODGE#19

D. ALVIN BUCKMAN JR.  
IMHOTEP TEMPLE LODGE#19

D. LUTHUR A. COLEY  
IMHOTEP TEMPLE LODGE#19

D. ALBERT WILLIAMS  
IMHOTEP TEMPLE LODGE#19

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)