

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769691

FILED
Sep 10, 2010
Secretary of State

Entity Name: VIRGIL HAWKINS FLORIDA CHAPTER NATIONAL BAR ASSOCIATION, INC.

Current Principal Place of Business:

C/O LETISHA BIVINS
3073 HORSESHOE DRIVE S, SUITE 210
NAPLES, FL 34104 US

New Principal Place of Business:

C/O C. SHA'RON JAMES
2849 ALEXIS LANE
TALLAHASSEE, FL 32308 US

Current Mailing Address:

C/O LETISHA BIVINS
3073 HORSESHOE DRIVE S, SUITE 210
NAPLES, FL 34104 US

New Mailing Address:

P.O. BOX 15279
TALLAHASSEE, FL 32317 US

FEI Number: 59-2437266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BIVINS, LETISHA D
3073 HORSESHOE DRIVE S
SUITE 210
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

HALL, ANTHONY J
111 NORTH MAGNOLIA AVENUE
SUITE 1250
ORLANDO, FL 32801 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: ANTHONY J. HALL

09/10/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: INGRAHAM, DEANA H
Address: 17760 NW 2ND AVENUE, SUITE 100
City-St-Zip: MIAMI, FL 33169

Title: PE
Name: JAMES, C. SHA'RON
Address: 2849 ALEXIS LANE
City-St-Zip: TALLAHASSEE, FL 32308

Title: T
Name: DONELL, ARAMIS N
Address: 435 NORTH ORANGE AVENUE, SUITE 400
City-St-Zip: ORLANDO, FL 32801 US

Title: V
Name: HALL, CEDRIC B
Address: 8695 COLLEGE PARKWAY, SUITE 1304
City-St-Zip: FT. MYERS, FL 33919

Title: S
Name: HOLMON, MAJA S
Address: 2653 NORTH POINT COURT, APT. B
City-St-Zip: TALLAHASSEE, FL 32308

Title: SL
Name: BUCKINE, PEGGY
Address: 2909 WHITTINGTON DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

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: DEANA HOLIDAY INGRAHAM

P

09/10/2010

Electronic Signature of Signing Officer or Director

Date