

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837797

FILED
Mar 08, 2004
Secretary of State

Entity Name: ASSOCIATION OF COMMUNITY ORGANIZATIONS FOR REFORM NOW, INC.

Current Principal Place of Business:

1024 ELYSIAN FIELDS AVENUE
NEW ORLEANS, LA 70117

New Principal Place of Business:

Current Mailing Address:

1024 ELYSIAN FIELDS AVENUE
NEW ORLEANS, LA 70117

New Mailing Address:

FEI Number: 72-0481941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: HURD, MAUDE,
Address: 60 EDSON STREET
City-St-Zip: DORCHESTER, MA 02124

Title: D () Delete
Name: HICKOX, DAVID,
Address: 3624 W MCKINLEY
City-St-Zip: PHOENIX, AR 85066

Title: D (X) Delete
Name: BOYD, ELLEN,
Address: 415 N 41ST STREET
City-St-Zip: PHOENIX, AZ 85008

Title: TD () Delete
Name: WILKERSON, ANGIE,
Address: 199 WOODROW AVENUE
City-St-Zip: DORCHESTER, MA 02124

Title: VP () Delete
Name: VASQUEZ, YVONNE
Address: 1834 KAMMERER AVENUE
City-St-Zip: SAN JOSE, CA 95116

Title: SD () Delete
Name: AMADI, DOROTHY,
Address: 784 BELMONT AVENUE
City-St-Zip: BROOKLYN, NY 11208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: AS (X) Change () Addition
Name: FAHERTY, BARBARA
Address: 1024 ELYSIAN FIELDS AVENUE
City-St-Zip: NEW ORLEANS, LA 70117

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

Title: TD (X) Change () Addition
Name: CLARK, JOHNNIE
Address: 1641 WAGON WHEEL TRAIL
City-St-Zip: DALLAS, TX 75241

Title: VPD (X) Change () Addition
Name: POLANCO, MARIA
Address: 390 GRAND CONCOURSE, #7
City-St-Zip: BRONX, NY 10451

Title: SD (X) Change () Addition
Name: NELSON, MAXINE
Address: 4308 W. 9TH AVE.
City-St-Zip: PINE BLUFF, AR 71603

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA FAHERTY

AS

03/08/2004

Electronic Signature of Signing Officer or Director

Date