

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006176

FILED
Apr 28, 2006
Secretary of State

Entity Name: JOHNNIE COLEMON INSTITUTE, INC.

Current Principal Place of Business:

11901 SOUTH ASHLAND AVE
CHICAGO, IL 60643

New Principal Place of Business:

Current Mailing Address:

11901 SOUTH ASHLAND AVE
CHICAGO, IL 60643

New Mailing Address:

FEI Number: 82-0571927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TUMPKIN, MARY A REV. DR
21310 N.W. 37TH AVE.
CAROL CITY, FL 33056 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: CPD () Delete
Name: COLEMON, JOHNNIE
Address: 11901 SOUTH ASHLAND AVE
City-St-Zip: CHICAGO, IL 60643

Title: VS () Delete
Name: LUSTER-LASSITER, EMMA
Address: 11901 SOUTH ASHLAND AVE
City-St-Zip: CHICAGO, IL 60643

Title: DT () Delete
Name: RATHEL, MICHELLE R
Address: 11901 SOUTH ASHLAND AVE
City-St-Zip: CHICAGO, IL 60643

Title: D () Delete
Name: FULLMAN, VIRGINIA
Address: 11901 SOUTH ASHLAND AVE
City-St-Zip: CHICAGO, IL 60643

Title: CP () Delete
Name: TUMPKIN, MARY A REV DR
Address: 21310 NW 37 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY A TUMPKIN

D

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date