SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

Principal Place of Business

F93000005580 (6)

Mailing Address

NATIONAL URBAN COALITION FOR UNITY AND PEACE, IN C.

2706 HARRIS ST., STE. 101 2706 HARRIS ST., STE. 101 EAST POINT GA 30344 EAST POINT GA 30344 3. Date Incorporated or Qualified 12/08/1993 3a. Date of Last Report 03/07/1995 2. Principal Place of Business 2a. Mailing Address 4 FEI Number Applied For 95-4060394 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEONARD. HARRELL L 82 Street Address (P.O. Box Number is Not Acceptable) 1024 W. 13TH ST. **LAKELAND FL 33805** 83 84 City 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) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE Change LEWIS, JAMES E JR. NAME 1.2 NAME 2706 HARRIS ST., STE. 101 STREET ADDRESS 1.3 STREET ADDRESS EAST POINT GA 30344 City-St-ZiP 14 OTY-ST-ZIP TITLE DELETE 21 TITLE Change Addition LEWIS, DONNA M NAME 22 NAME 2706 HARRIS STREET, STE. 101 STREET ADDRESS 2.3 STREET ADDRESS **EAST POINT GA** CITY-ST-ZIP 2 4 City-ST-ZIP DELETE Change Addition TITLE 31 TITLE RODGERS, JOAN 3.2 NAME NAME 2706 HARRIS ST., STE. 101 STREET ADORESS 3.3 STREET ADDRESS EAST POINT GA CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change TITLE 4.1 TITLE CARTER, ELBERT NAME 4 2 NAME 336 WESTWOOD PLACE #4 STREET ADDRESS 43 STREET ADDRESS **AUSTELL GA** CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE 51 TITLE Change Addition TITLE BANKS, JOANN NAME 5.2 NAME 2706 HARRIS ST., STE. 101 STREET ADDRESS 5.3 STREET ADDRESS EAST POINT GA 30344 CITY-ST-ZIP 5.4 City-St-ZiP DELETE Change Addition TITLE 61 TITLE . NAME 6.2 NAME

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oally final I aim so office 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 of the accuracy address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AMES E. Lewis, Se. Pres. 6-8-96
Daying Proces