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NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of

DIVISION OF CORPORATIONS

DOCUMENT # F9400001347 (3)

LOUIS JAY - JOSEPHINE JOHNSON MEMORIAL SCHOLARSH IP FOUNDATION, INC.

Principal Place of Business Mailing Address
8901 S.W. 127 TERRACE



Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Scriptions of Status Desired   \$8.75 Apditions   \$9.75 Apditions   \$9.7	MIAMI FL :	33176	8901 S.W. 127 TERRACE Miami Fl 33176								
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Soute, Apt. #, etc.	2. Principal	Place of Business	2a Mailing Address				03/16/1994				
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Scortificate of Status Dosined   Sk.75 Additions fee Required City & State   City &			F				4. FEI Number 52-1726201			Applied For	
City & State 23  City & State 25  City & State 26  City & State 27  Country 28  Country 30	<u> </u>	ot. #, etc.	Suite, Apt. #, etc.				Not Applicat				
Zip Country Zip Country 2 Zip Country 8. This Fund Contribution Added to Piess 199.032.   7		ate	···	City & State							
Zel			28				Trust Fund Contribution	\$5.00 May Be			
9. Name and Address of Current Registered Agent  10. Name and Address of Now Registered Agent  TERRY, LEROY 8901 S.W. 127 TERRACE MIAMI FL 33176  83  84 City  FL  85 Vip Code  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Fordisa Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am SIGNATURE  Signature, fixed or protect Agent	<del></del> 1	<b>⊢</b> ⊸ ′	<u> </u>	Cou	ntry			_		Added to Fees	
TERRY, LEROY 8901 S.W. 127 TERRACE MIAMI FL 33176  81 Name 82 Street Address (P.O. Box Number is Not Acceptable)  83 Virginia Acceptable 84 City 85 City 85 City 85 City 86 City 86 City 87 Company and or protect agent and or protect agent are or pregistered agent. To both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered of agent, to both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered of agent, to about a company and or presidence of process of changing its registered of directors. Thereby accept the appointment as registered agent, I am Signature.  85 City 85 Cit			29 30				Florida Statutes Yes No				
Separation to the provisions of Sections 817,0502 and 817,1508, Florida Statutes, the above-named corporation submits the statement for the purpose of changing its registered or registered agent, or both in the State of Forda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am Signature, and the children of registered agent and of registered agent. I am Signature, the economic agent agent and of registered agent and of registered agent and of registered agent. I am Signature registered agent. I am Signature registered agent agent and of registered agent. I am Signature registered agent agent and of registered agent. I am Signature registered agent agent and of registered agent. I am Signature registered agent agen	<del></del>	or the Address of Curren	it negistered Agent		44		10. Name and Address of New Re	gistered	Agen	·	
8901 S.W. 127 TERRACE MIAMI FL 33176  81 Street Activess (P.O. Box Number is Not Acceptable)  82 Street Activess (P.O. Box Number is Not Acceptable)  83	TERRY.	LEROY		1	81	Name					
MIAMI FL 33176  #84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 817,0502 and 617,1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent as registered agent and statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PCD  HARRIS, WILLIAM T  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  HARRIS, WILLIAM T  14. City 17. Title  PCD  HARRIS, WILLIAM T  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  16. Change   Addition  17. Change   Addition  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND D					82	Street Addr	ess (P.O. Box Number is Not Acceptable	,			
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby eccept the appointment as registered agent. I am occept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  HARRIS, WILLIAM T  3650 TEXAS AVE S.E.  WASHINGTON DC  112 TITLE  VD  DELETE  12 TITLE  VS  WASHINGTON DC  14 CITY-ST-2P  WASHINGTON DC  15 TITLE  VD  DELETE  22 MAME  SIRRET ADDRESS  CITY-ST-2P  DELETE  33 STREET ADDRESS  CITY-ST-2P  DELETE  33 STREET ADDRESS  CITY-ST-2P  DELETE  31 STREET ADDRESS  CITY-ST-2P  MAWE  BURDEN, FRANK  30 SIRRET ADDRESS  CITY-ST-2P  MIAMI FL  S  MIAMI FL  S  MAME  JAMES, LEOLA  22865 RANKIN ROAD  BEDFORD HEIGHTS OH  ACTIV-ST-2P  DELETE  41 TITLE  34 CITY-ST-2P  MAME  JAMES, LEOLA  22865 RANKIN ROAD  BEDFORD HEIGHTS OH  ACTIV-ST-2P  DELETE  41 TITLE  34 CITY-ST-2P  MAME  JAMES, LEOLA  22865 RANKIN ROAD  BEDFORD HEIGHTS OH  ACTIV-ST-2P  DELETE  41 TITLE  34 CITY-ST-2P  MAME  JAMES, LEOLA  22865 RANKIN ROAD  BEDFORD HEIGHTS OH	MIAMI F	L 33176		<u> </u>				<b>,</b>			
11. Pursuant to the provisions of Sections B17,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of a familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, a familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PCD  HARRIS, WILLIAM T  OBLETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  STREET ADDRESS  3650 TEXAS AVE S.E.  13. STREET ADDRESS  CITY-S1-2IP  WASHINGTON DC  14. CITY-S1-2IP  NAME  RICKS, IDA D  DELETE  13. TITLE  14. CITY-S1-2IP  NAME  RICKS, IDA D  DELETE  21. TITLE  D  Change Addition  STREET ADDRESS  CITY-S1-2IP  D  DELETE  33. STREET ADDRESS  CITY-S1-2IP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition  STREET ADDRESS  CITY-S1-2IP  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  Change Addition  Addition  TITLE  D  Change Addition  JAMES, LEOLA  JAMES, LEOLA  JAMES, LEOLA  JAMES, LEOLA  BEDFORD HEIGHTS OH  Addition  DELETE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LEARN A				- '	83		<del></del>				
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 of 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 statement for the purpose of changing its registered of familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE    Signature hold or printed name of registered agent and the I applicable   NOTE Registered Agent soyalure required when renetating)   DATE	*				- 1				05	Zip Code	
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SIGNATURE    Signature, typed or protect name of registered agent and title if epphasizable.   PNOTE Registered Agent signature required when rendating)   DATE	or registe familiar w	ered agent, or both, in the State of Floric with, and accept the obligations of Sections	la. Such change was authoriz	ed by the co	orpo	arried corpora oration's board	ation submits this statement for the purpord of directors. I hereby accept the appoint	se of cha	inging	its registered office	
Signature. Typed or profiled name of registered agent and title if applicable of PROTE Registered Agent signature required when receitating DATE    PCD	SIGNATURE	,	on on 1.0000, Flurida Statutes	3.			то туровор в но аррол	illine il as	registe	ered agent. I am	
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rout hereby early 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

THAND WILLIAM HARRIS

3/32/02 3,35021113