## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000006015

Apr 12, 2011 Secretary of State

Entity Name: SOUTHERN POVERTY LAW CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

400 WASHINGTON AVENUE MONTGOMERY, AL 36104 LIS

**Current Mailing Address: New Mailing Address:** 

400 WASHINGTON AVENUE MONTGOMERY, AL 36104 US

FEI Number: 63-0598743 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

**BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 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: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

HUTCHISON, TEENIE Name: Address: 400 WASHINGTON AVENUE City-St-Zip: MONTGOMERY, AL 36104

Title:

Name: BOND, JULIAN

Address: 400 WASHINGTON AVENUE City-St-Zip: MONTGOMERY, AL 36104

Title:

HOWARD, MANDELL Name: Address: 400 WASHINGTON AVENUE City-St-Zip: MONTGOMERY, AL 36104

Title:

Name: HACKLEY, LLOYD

Address: 400 WASHIGTON AVENUE City-St-Zip: MONTGOMERY, AL 36104

Title:

Name: RUCKER, JAMES

400 WASHINGTON AVENUE Address: City-St-Zip: MONTGOMERY, AL 36104

Title:

MCELROY, JAMES Name:

Address: 400 WASHINGTON AVENUE MONTGOMERY, AL 36104 City-St-Zip:

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: TEENIE HUTCHISON S 04/12/2011