

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004081

FILED
Apr 03, 2012
Secretary of State

Entity Name: FLORIDA AFRICAN AMERICAN HERITAGE PRESERVATION NETWORK, LLC

Current Principal Place of Business:

419 E. JEFFERSON STREET
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

419 E. JEFFERSON STREET
TALLAHASSEE, FL 32301 US

New Mailing Address:

FEI Number: 20-5462873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, ALTHEMESE
419 E. JEFFERSON STREET
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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ROOKS, SANDRA TRUSTEE
Address: P.O. BOX 5785
City-St-Zip: CLEARWATER, FL 33758 US

Title: MGR
Name: LEWIS, CLIFTON B. TRUSTEE
Address: 470 SECOND AVE.
City-St-Zip: BARTOW, FL 33830 US

Title: MGR
Name: PITTMAN, JU'COBY TRUSTEE
Address: 613 WEST ASHLEY STREET
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MGR
Name: BARBER, TIM TRUSTEE
Address: 5400 N.W. 22ND AVENUE C STE. 101
City-St-Zip: MIAMI, FL 33142 US

Title: MGR
Name: INGRAM, SPENCER TRUSTEE
Address: 120 SALEM COURT
City-St-Zip: TALLAHASSEE, FL 32301 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALTHEMESE BARNES

R.AD

04/03/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date