## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000003141

FILED Jan 09, 2004 Secretary of State

Entity Name: LUMPKIN FAMILY FELLOWSHIP FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 20107 N.W. 58TH PL HIALEAH, FL 33015 US **Current Mailing Address: New Mailing Address:** P.O. BOX 4175 HIALEAH, FL 33014 US FEI Number: 65-1007629 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: WOODEN, JACCQUELYN L 99 N.W. 183RD STREET SUITE 240 MIAMI, FL 33169 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LUMPKIN, EARL L SR Name: Name: Address: 20107 N.W. 58TH PL. Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: Title: ( ) Delete Title: () Change () Addition LUMPKIN, REV. JOHN SR Name: Name: Address: 5711 NESBITT LANE Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition JACKSON, CYPRINNA Name: JACKSON, CYPRINNA Name: 721 N.W. 135TH WAY Address: 721 N.W. 135TH WAY Address: City-St-Zip: PLANTATION, FL 33325 City-St-Zip: PLANTATION, FL 33325 Title: () Delete Title: () Change () Addition LUMPKIN, EARL L JR Name: Name: 20107 N.W. 58TH PL Address: Address: City-St-Zip: HIALEAH, FL 33015 City-St-Zip: Title: Title: () Delete () Change () Addition LUMPKIN, ACQUELYN Name: Name: 6510 S.W. 194TH ST. Address: Address: City-St-Zip: ARCHER, FL 32618 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition PERKINS, BETTY PERKINS, BETTY Name: Name: Address: 3711 S.W. 169TH AVE. Address: 3711 S.W. 169TH AVE. MIRAMAR, FL 33027 MIRAMAR, FL 33027 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EARL LESTER LUMPKIN, SR. P 01/09/2004