

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2002 8:00 am
Secretary of State

09-18-2002 90053 031 ****61.25

DOCUMENT # N00000003601

1. Entity Name

NAMC COMMUNITY DEVELOPMENT CORPORATION

Principal Place of Business

5923 NORWOOD AVE
 JACKSONVILLE FL 32208

Mailing Address

5923 NORWOOD AVE
 JACKSONVILLE FL 32208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3652286

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRUITT, WILLIAM J
5923 NORWOOD AVE
JACKSONVILLE FL 32208

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME **P** ☐ Delete
TRUITT, WILLIAM J
 STREET ADDRESS
5923 NORWOOD AVENUE
 CITY-ST-ZIP
JACKSONVILLE FL 32209

TITLE
 NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP **32208**

TITLE
 NAME **TD** ☒ Delete
MINOR, CHARLES
 STREET ADDRESS
5923 NORWOOD AVENUE
 CITY-ST-ZIP
JACKSONVILLE FL 32209

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME **SD** ☐ Delete
HOPE, ARTIE S
 STREET ADDRESS
5923 NORWOOD AVENUE
 CITY-ST-ZIP
JACKSONVILLE FL 32209

TITLE
 NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP **32208**

TITLE
 NAME **D** ☐ Delete
HASSAN, YAHYA
 STREET ADDRESS
5923 NORWOOD AVENUE
 CITY-ST-ZIP
JACKSONVILLE FL 32209

TITLE
 NAME ☒ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP **32208**

TITLE
 NAME **D** ☒ Delete
VALDAZ, CHAZES
 STREET ADDRESS
5923 NORWOOD AVENUE
 CITY-ST-ZIP
JACKSONVILLE FL 32209

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☒ Addition
 STREET ADDRESS
Dukes, Walter E. Dr.
U.O.F., P.O. Box 115703
Gainesville, FL 32611
Fine Arts C101

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William J. Truitt* **William J. Truitt** **9/16/02** **(904) 766-9249**

CR2E037 (4/02)