

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007963

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** ORACENE WILLIAMS LEARNING FOUNDATION, INC.

**Current Principal Place of Business:**

C/O 5725 CORPORATE WAY  
SUITE 206  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 5725 CORPORATE WAY  
SUITE 206  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 52-2297314

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, ZENORA K  
5725 CORPORATE WAY  
SUITE 206  
WEST PALM BEACH, FL 33407 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PRICE, ORACENE  
Address: 4915 WINNETKA AVENUE  
City-St-Zip: WOODLAND HILLS, CA 91364

Title: V  
Name: BARRY, CORA M  
Address: 701 MISSISSIPPI AVENUE SE  
City-St-Zip: WASHINGTON, DC 20032

Title: TR  
Name: BAILEY, LARRY D  
Address: 1718 M STREET NW, SUITE 373  
City-St-Zip: WASHINGTON, DC 20036

Title: S  
Name: PRICE, ISHA  
Address: 8004 WANNIS COURT  
City-St-Zip: CLINTON, MD 20735

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: LARRY D. BAILEY

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04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date