

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008087

FILED  
Jan 15, 2012  
Secretary of State

**Entity Name:** NORTHEAST BLACK HISTORY COMMITTEE, MOUNT DORA, INC.

**Current Principal Place of Business:**

C/O JOHN J NEUMAIER  
601 N MCDONALD ST, APT 410  
MOUNT DORA, FL 327574893 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DR. SARA F LUTHER  
601 N. MCDONALD STREET APT 410  
MOUNT DORA, FL 327574893

**New Mailing Address:**

**FEI Number:** 59-3682661

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STRICKLAND, WILLIAM J  
4301 CAROUSEL ROAD  
ORLANDO, FL 32808 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: PRES  
Name: WATSON, RUTHIE MS.  
Address: 1650 TREMAIN STREET  
City-St-Zip: MOUNT DORA, FL 32757

Title: 1VP  
Name: NEUMAIER, JOHN J DR.  
Address: 601 N. MCDONALD STREET APT 410  
City-St-Zip: MOUNT DORA, FL 327574893

Title: TD  
Name: STRICKLAND, WILLIAM J MR.  
Address: 4301 CAROUSEL ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: SD  
Name: LUTHER, SARA F  
Address: 601 N. MCDONALD STREET APT 410  
City-St-Zip: MOUNT DORA, FL 327574893

Title: 2VP  
Name: LOTT GREY, BRENDA  
Address: 406 JACKSON AVE  
City-St-Zip: MOUNT DORA, FL 32757

Title: A  
Name: OWENS, VIVIAN W  
Address: 3920 OHIO BLVD  
City-St-Zip: EUSTIS, FL 32726

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: SARA F. LUTHER

SD

01/15/2012

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

\_\_\_\_\_  
Date