2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003747

Entity Name: BLACK CAUCUS OF ALA, INC.

FILED Apr 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2301 S OCEAN DRIVE **APT # 707** HOLLYWOOD, FL 33019 **New Mailing Address: Current Mailing Address:** 2301 S OCEAN DRIVE APT # 707 HOLLYWOOD, FL 33019 FEI Number: 52-1892263 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: SIMKINS-BROWN, FLORENCE 2301S OCEAN DRIVE APT # 707 HOLLYWOOD, FL 33019 US 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: () Delete (X) Change () Addition JACKSON, ANDREW P MR BROWN, WANDA P MS Name: Name: 100-01 NORTHERN BLVD Address: P.O. BOX 7777 REYNOLDS STATION Address: City-St-Zip: CORONA, NY 11368 City-St-Zip: WINSTON-SALEM, NC 27109 Title: () Delete Title: (X) Change () Addition JACKSON, ANDREW P MR. Name: THOMPSON, KAROLYN MS. Name: Address: 100-01 NORTHERN BLVD. Address: 118 CAMPUS DRIVE #5053 City-St-Zip: CORONA, NY 11368 City-St-Zip: HATTIESBURG, MS 39406 Title: () Delete Title: (X) Change () Addition BROWN, WANDA K MS LANG, JENNIFER MS Name: Name: P.O. BOX 777-REYNOLDS STATION Address: Address: ONE WASHINGTON ROAD City-St-Zip: City-St-Zip: WINSTON SALEM, NC 27109 PRINCETON, NJ 08544 29 Title: TD () Delete Title: () Change () Addition Name: BIDDLE, STANTON F DR. Name: 158-18 RIVERSIDE DRIVE WEST #7B Address: Address: City-St-Zip: NEW YORK, NY 10032 City-St-Zip: Title: () Delete Title: (X) Change () Addition BARKSDALE-HALL, ROLAND MR. JACKSON, ANDREW PMR. Name: Name: 939 BALDWIN AVENUE, SUITE 1 100-01 NORTHERN BLVD. Address: Address: City-St-Zip: SHARON, PA 16146 City-St-Zip: CORONA, NY 11368 Title: () Delete Title: () Change () Addition SPRINKLE-HAMLIN, SYLVIA MS. Name: Name: Address: FORSYTH COUNTY PUBLIC LIBRARY Address: WINSTON-SALEM, NC 27101 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STANTON F. BIDDLE TD 04/28/2007