

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004316

FILED
Mar 21, 2006
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF BLACK HOTEL OWNERS, OPERATORS & DEVELOPERS, INC.

Current Principal Place of Business:

3520 W. BROWARD BLVD.
SUITE 218B
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3520 W. BROWARD BLVD.
SUITE 218B
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: 65-1132011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAHAM, ANDREW
3520 W. BROWARD BLVD.
SUITE 218B
FORT LAUDERDALE, FL 33312 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: CHAI () Delete
Name: ROBERTS, MICHAEL
Address: 1408 N. KINGS HWY., #300
City-St-Zip: ST. LOUIS, MO 63113

Title: VC () Delete
Name: BALTIMORE, THOMAS
Address: 6903 ROCKLEDGE DR., #910
City-St-Zip: BETHESDA, MD 20817

Title: TREA () Delete
Name: GUILLORY, JAMES
Address: 4702 LABRANCH STREET
City-St-Zip: HOUSTON, TX 77004

Title: SEC () Delete
Name: ROSE, DON
Address: 65 NEWBURY
City-St-Zip: DANVER, MA 01923

Title: PRES () Delete
Name: INGRAHAM, ANDREW
Address: 3520 W. BROWARD BLVD., #218B
City-St-Zip: FORT LAUDERDALE, FL 33312 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PCEO (X) Change () Addition
Name: INGRAHAM, ANDREW
Address: 3520 W. BROWARD BLVD., #218B
City-St-Zip: FORT LAUDERDALE, FL 33312 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW INGRAHAM

PCEO

03/21/2006

Electronic Signature of Signing Officer or Director

Date