

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2004 8:00 am
Secretary of State

04-06-2004 90030 033 ****61.25

DOCUMENT # N01000004739

1. Entity Name

BAY AREA MINORITY CONTRACTORS ASSOCIATION, INC.



Principal Place of Business

**1008 26TH ST, COURT EAST
PALMETTO FL 34221**

Mailing Address

**P.O BOX 441
PALMETTO FL 34220**

44063618



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCPHERSON, PHILIP
1008 26TH ST, COURT EAST
PALMETTO FL 34221**

7. Name and Address of New Registered Agent

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME WILLIAMS, NEAL
STREET ADDRESS 4456 6TH AVE E
CITY-ST-ZIP BRADENTON FL 34208 ☐ Delete

TITLE VD
NAME PRESHA, WALTER
STREET ADDRESS 880 33RD ST E
CITY-ST-ZIP PALMETTO FL 34221 ☐ Delete

TITLE TD
NAME MCPHERSON, PHILIP
STREET ADDRESS 1008 26TH ST, COURT EAST
CITY-ST-ZIP PALMETTO FL 34221 ☐ Delete

TITLE SD
NAME ROZIER, TRINA
STREET ADDRESS 880 33RD ST E
CITY-ST-ZIP PALMETO FL 34221 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE **SR**
NAME **Raymond Woodie Jr**
STREET ADDRESS **1008 31st St. East**
CITY-ST-ZIP **PALMETTO, FL 34221** ☐ Change ☒ Addition

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

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

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: *Philip L. McPherson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/04
Date

941-722-5687
Daytime Phone #