

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002750

FILED  
May 08, 2007  
Secretary of State

Entity Name: JOHNNY CARL LLOYD MEMORIAL FUND, INC.

**Current Principal Place of Business:**

3490 NW 6 STREET  
FT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

3490 NW 6 STREET  
FT LAUDERDALE, FL 33311

**New Mailing Address:**

FEI Number: 01-0703011      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

IRVIN-DAWSON, VIRGINIA  
3490 NW 6 STREET  
FT LAUDERDALE, FL 33311      US

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

IRVIN, ROSE  
3490 NW 6 STREET  
FT LAUDERDALE, FL 33311      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: ROSE IRVIN

05/08/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: DAWSON, GEORGE  
Address: 3490 NW 6 STREET  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: ASSD      ( ) Delete  
Name: LLOYD, VEANNA N  
Address: 3490 NW 6TH ST  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D      ( ) Delete  
Name: COACHMEN, CORNELIUS  
Address: 203 NE 35 STREET  
City-St-Zip: OAKALAND PARK, FL 33334

**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:

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: VIRGINIA DAWSON

PRES

05/08/2007

Electronic Signature of Signing Officer or Director

Date