


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000006753		
1. Entity Name JUDICIAL COUNCIL OF THE VIRGIL HAWKINS FLORIDA CHAPTER OF THE NATIONAL BAR ASSOCIATION, INC.		
Principal Place of Business 101 N. ALABAMA AVENUE #432 DELAND, FL 32720	Mailing Address 101 N. ALABAMA AVENUE, #432 #432 DELAND, FL 32720	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent GRIMES, HUBERT JUDGE 101 N. ALABAMA AVENUE #432 DELAND, FL 32720		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIMES, HUBERT L 101 N. ALABAMA AVENUE, #432 DELAND, FL 32720	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AIKENS, AUGUSTUS D JR. 301 S. MONROE ST., RM. 265-E TALLAHASSEE, FL 32301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUINCE, PEGGY A 500 S. DUVAL ST. TALLAHASSEE, FL 323991925	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PERRY, JAMES E 301 NORTH PARK AVE. SANFORD, FL 327711292	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRENSHAW, MARVA L 419 PIERCE ST. TAMPA, FL 33602	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAMS, HENRY L JR. 311 W. MONROE ST., #110 JACKSONVILLE, FL 322024242	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an other like empowered.		
SIGNATURE: <u>Hubert Grimes</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4/28/06</u> <small>Daytime Phone #</small>



04282006 No Chg-NP CR2E037 (4/06)

4. FEI Number 13-4263990	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

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05/17/06-80049-003 70.00

**DO NOT WRITE
IN THIS SPACE**