2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009676

FILED Apr 27, 2007 Secretary of State

Entity Name: MARTIN LUTHER KING, JR. HOLIDAY & LEGACY ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	HAVE. SOUTH RSBURG, FL 33	3712			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	HAVE. SOUTH RSBURG, FL 33	3712			
FEI Number	r: 56-2424193	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
3235 16ŤI ST. PETE	SEVELL C III H AVE. SOUTH RSBURG, FL 33		ournose of changing its register	ed office or registered agent, or both,	
	e of Florida.	brillia tilla statement for tile p	purpose of changing its register	ed office of registered agent, of both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD ()E BROWN, SEVELI 3235 16TH AVE. ST. PETERSBUR	S.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () E ROYAL, CORA 3933 35TH WAY ST. PETERSBUR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FSD () E BROWN, PLEXIE 3310 16TH AVE. ST. PETERSBUR	S.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	BROWN, PLEXIE 3310 16TH AVE. ST. PETERSBUR	: S. G, FL 33712 Delete NE S.	Name: Address:	() Change () Addition () Change () Addition	

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: SEVELL C BROWN III PD 04/27/2007