2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2009
Secretary of State

DOCUMENT# N03000009676

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

Current Principal Place of Business:

3235 16TH AVE. SOUTH
ST. PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

3235 16TH AVE. SOUTH
ST. PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 56-2424193 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

BROWN, SEVELL C III
3235 16TH AVE. SOUTH
ST. PETERSBURG, FL 33712 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: PD ( ) Delete
Name: BROWN, SEVELL C III
Address: 3235 16TH AVE. S.
City-St-Zip: ST. PETERSBURG, FL 33712

Title: VD ( ) Delete
Name: ROYAL, CORA
Address: 3933 35TH WAY S. #121
City-St-Zip: ST. PETERSBURG, FL 33711

Title: FSD ( ) Delete
Name: BROWN, PLEXIE
Address: 3310 16TH AVE. S.
City-St-Zip: ST. PETERSBURG, FL 33712

Title: TD ( ) Delete
Name: HAYES, CHRISTINE
Address: 3500 28TH AVE. S.
City-St-Zip: ST. PETERSBURG, FL 33711

Title: RSD ( ) Delete
Name: GREEN, SHARON
Address: 701 11TH AVE. S.
City-St-Zip: ST. PETERSBURG, FL 33705

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: ( ) 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: SEVELL C. BROWN, III PRES 07/28/2009

Electronic Signature of Signing Officer or Director — Date