

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004133

FILED
Apr 06, 2010
Secretary of State

Entity Name: AFRICAN AMERICAN GOLFER'S HALL OF FAME, INC.

Current Principal Place of Business:

1032 CENTER STONE LANE
RIVIERA BEACH BEACH, FL 33404 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 31901
PALM BEACH GARDENS, FL 33420

New Mailing Address:

FEI Number: 26-0792398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNOWLES, ESMERALDA H
1032 CENTER STONE LANE
RIVIERA BEACH, FL 33404 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: DC
Name: KNOWLES, MALACHI
Address: PO BOX 31901
City-St-Zip: PALM BEACH GARDENS, FL 33420

Title: DV
Name: KNOWLES, JOHN H
Address: 3702 EVANS TRAIL WAY
City-St-Zip: BELTSVILLE, MD 20705 US

Title: DS
Name: KNOWLES, ESMERALDA H
Address: PO BOX 31901
City-St-Zip: PALM BEACH GARDENS, FL 33420 US

Title: DT
Name: BURGMAN, RAYMONDA PH.D
Address: PO BOX 31901
City-St-Zip: PALM BEACH GARDENS, FL 33404 US

Title: D
Name: BROWN, SR., GORDON
Address: PO BOX 31901
City-St-Zip: PALM BEACH GARDENS, FL 33420 US

I hereby 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 all other like empowered.

SIGNATURE: MALACHI KNOWLES

DC

04/06/2010

Electronic Signature of Signing Officer or Director

Date