

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004670

FILED
May 05, 2008
Secretary of State

Entity Name: FLORIDA GULF COAST TEAMSTERS NATIONAL BLACK CAUCUS INC.

Current Principal Place of Business:

2218 9TH AVENUE EAST
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

PO BO 1561
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 59-3736589 **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:

Name and Address of New Registered Agent:

EDWARDS, INEDA
2218 9TH AVENUE EAST
BRADENTON, FL 34208 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EDWARDS, INEDA
Address: 2218 9TH AVENUE EAST
City-St-Zip: BRADENTON, FL 34208

Title: VP () Delete
Name: DAVIS, BOBBY
Address: 3315 32TH STREET WEST
City-St-Zip: BRADENTON, FL 34205

Title: SEC. () Delete
Name: HUTCHINSON, DEBORAH K
Address: 511 30TH STREET EAST
City-St-Zip: PALMETTO, FL 34221

Title: TRES () Delete
Name: BYRD, LYNDA
Address: 2006 3RD AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

Title: TRUS () Delete
Name: SLOAN, JOHNNIE
Address: 1907 TALLEVAST RD.
City-St-Zip: TALLEVAST, FL 34270

Title: TRUS () Delete
Name: WALKER, LEOLA
Address: 1214 2ND AVENUE WEST
City-St-Zip: PALMETTO, FL 33647

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: TRES (X) Change () Addition
Name: DUPREE, LARRY
Address: 8301 N. RIVER HIGHLAND PL.
City-St-Zip: TAMPA, FL 33617

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRUS (X) Change () Addition
Name: WALKER, LEOLA
Address: 1214 2ND AVENUE WEST
City-St-Zip: PALMETTO, FL 33422

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: INEDA EDWARDS

VP

05/05/2008

Electronic Signature of Signing Officer or Director

Date