2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N05000000028

Entity Name: THE FRED G. MINNIS, SR. BAR FOUNDATION, INC.

Current Principal Place of Business:

1 FOURTH ST NORTH
ST. PETERSBURG, FL 33701

New Principal Place of Business:

11101 ROOSEVELT BOULEVARD
ST. PETERSBURG, FL 33716

Current Mailing Address:

P.O. BOX 1157
ST. PETERSBURG, FL 337311157

New Mailing Address:

FEI Number: 25-1906012 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, JEANNINE
1 FOURTH STREET NORTH
ST. PETERSBURG, FL 33701 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: D ( ) Delete
Name: CAMPBELL, YASHEAKA
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

Title: D ( ) Delete
Name: RICHARDSON, JOHN
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

Title: D ( ) Delete
Name: CHAMPAGNE, LAGUERRA
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

Title: D ( ) Delete
Name: MYERS-SIMMONS, CAROLYN
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

Title: D ( ) Delete
Name: SMITH-KHAN, CHERYL
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

Title: D ( ) Delete
Name: WILLIAMS, JEANNINE
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

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: D (X) Change ( ) Addition
Name: GAYLE-KELLY, JACQUELINE
Address: P.O. BOX 1157
City-St-Zip: ST. PETERSBURG, FL 337311157

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: JEANNINE S. WILLIAMS MS 03/27/2009

Electronic Signature of Signing Officer or Director — Date