2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002964

Entity Name: FLORIDA CIVIL RIGHTS ASSOCIATION, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1003 SOUTH KIRKMAN ROAD 927 SOUTH GOLDWYN AVENUE

ORLANDO, FL 32811 ORLANDO, FL 32805

Current Mailing Address: New Mailing Address:

PO BOX 593248 ORLANDO, FL 32859

FEI Number: 84-1675341 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVID, J WILLIE III

1003 SOLITH KIRKMAN ROAD

DAVID, J WILLIE III

1003 SOLITH KIRKMAN ROAD

927 SOLITH GOLDW

1003 SOUTH KIRKMAN ROAD 927 SOUTH GOLDWYN AVENUE ORLANDO, FL 32811 US ORLANDO, FL 32805 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: J WILLIE DAVID, III 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

e: PRS () Delete Title: DP (X) Change() Addition

 Name:
 DAVID, J WILLIE III
 Name:
 DAVID, J WILLIE III

 Address:
 P O BOX 593248
 Address:
 P O BOX 593248

 City-St-Zip:
 ORLANDO, FL 32859
 City-St-Zip:
 ORLANDO, FL 32859

Title: DST () Delete Title: DVP (X) Change () Addition

 Name:
 WATSON, MARSHA
 Name:
 THERVIL, ERNST

 Address:
 P O BOX 593248
 Address:
 P O BOX 593248

 City-St-Zip:
 ORLANDO, FL 32859
 City-St-Zip:
 ORLANDO, FL 32859

Title: DIR () Delete Title: D (X) Change () Addition

 Name:
 SPARKS, ALMA
 Name:
 SPARKS, ALMA

 Address:
 P O BOX 593248
 Address:
 P O BOX 593248

 City-St-Zip:
 ORLANDO, FL 32859
 City-St-Zip:
 ORLANDO, FL 32859

 Name:
 WASHINGTON, TAMMI
 Name:
 WASHINGTON, TAMMI

 Address:
 P O BOX 593248
 Address:
 P O BOX 593248

 City-St-Zip:
 ORLANDO, FL 32859
 City-St-Zip:
 ORLANDO, FL 32859

Title: DS () Change (X) Addition

 Name:
 Name:
 SMITH, KATIANA

 Address:
 Address:
 P.O. BOX 593248

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32859 OR

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: J WILLIE DAVID, III DP 04/30/2008