

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006372

FILED
Apr 30, 2011
Secretary of State

Entity Name: MEN OF D.I.S.T.I.N.C INC

Current Principal Place of Business:

3801 MISSION TRACE BLVD.
J6
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3801 MISSION TRACE BLVD.
J6
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 47-0955850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILLS, JOVAN A
3801 MISSION TRACE BLVD.
J6
TALLAHASSEE, FL 32303 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: PRES
Name: JACKSON, ANTOINE
Address: 3801 MISSION TRACE BLVD. #J6
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: VICE
Name: BOWMAN, MEMORY
Address: 3801 MISSION TRACE BLVD. #J6
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: SEC
Name: JOHNSON, RAMON
Address: 3801 MISSION TRACE BLVD. #J6
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: TRES
Name: HOLMES, ANTONIO
Address: 3801 MISSION TRACE BLVD. #J6
City-St-Zip: TALLAHASSEE, FL 32303 US

Title: REGI
Name: FOSTER, RAFAEL
Address: 3801 MISSION TRACE BVD. #J6
City-St-Zip: TALLAHASSEE, FL 32303

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: ANTONIO HOLMES

TRES

04/30/2011

Electronic Signature of Signing Officer or Director

Date