

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90109 038 ****61.25

DOCUMENT # N06000006513 1. Entity Name MLK COMMITTEE OF WEST PARK, INCORPORATED					
Principal Place of Business 5051 SW 19 STREET WEST PARK, FL 33023			Mailing Address 5051 SW 19 STREET WEST PARK, FL 33023		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number NOT APPLICABLE				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RICHARDSON, GENTRY 5051 SW 19 STREET WEST PARK, FL 33023			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICHARDSON, GENTRY 5051 SW 19 STREET WEST PARK, FL 33023 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KENDRICK, MARY 5206 SW 23 STREET WEST PARK, FL 33023 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA JAMISON, GINO 5051 SW 19 STREET WEST PARK, FL 33023 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Sara Snell 1941 S.W. 57 Ave. West Park, FL 33023 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC TAYLOR, ROBIN 5323 SW 32 STREET HOLLYWOOD, FL 33023 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Florence Thomas 4780 S.W. 26 St. West Park, FL 33023 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FINS THOMAS, FLORENCE 4780 SW 26 STREET WEST PARK, FL 33023 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOR HAMPTON, CORNELL 1361 SW 106 AVENUE PEMBROKE PINES, FL 33025 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gentry Richardson</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4-19-08 954-989-0242 Date Daytime Phone #		