

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006513

FILED
Apr 20, 2009
Secretary of State

Entity Name: MLK COMMITTEE OF WEST PARK, INCORPORATED

Current Principal Place of Business:

5051 SW 19 STREET
WEST PARK, FL 33023

New Principal Place of Business:

Current Mailing Address:

5051 SW 19 STREET
WEST PARK, FL 33023

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDSON, GENTRY
5051 SW 19 STREET
WEST PARK, FL 33023 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: P () Delete
Name: RICHARDSON, GENTRY
Address: 5051 SW 19 STREET
City-St-Zip: WEST PARK, FL 33023

Title: VP () Delete
Name: KENDRICK, MARY
Address: 5206 SW 23 STREET
City-St-Zip: WEST PARK, FL 33023

Title: T () Delete
Name: SNELL, SARA
Address: 1941 S.W. 57 AVE.
City-St-Zip: WEST PARK, FL 33023

Title: S () Delete
Name: FLORENCE, THOMAS
Address: 4780 S.W. 26 ST.
City-St-Zip: WEST PARK, FL 33023

Title: S () Delete
Name: THOMAS, FLORENCE
Address: 4780 SW 26 STREET
City-St-Zip: WEST PARK, FL 33023

Title: COOR (X) Delete
Name: HAMPTON, CORNELL
Address: 1361 SW 106 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33025

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: S (X) Change () Addition
Name: FYFFEE, SHARON
Address: 4020 S.W. 33RD. STREET
City-St-Zip: WEST PARK, FL 33023

Title: B (X) Change () Addition
Name: THOMAS, FLORENCE
Address: 4780 SW 26 STREET
City-St-Zip: WEST PARK, FL 33023

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: GENTRY RICHARDSON

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date