

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009562

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** FAMU/LINCOLN HIGH SCHOOL OF CLASSES OF 1959, INC.

**Current Principal Place of Business:**

7245 CLINTON HUDSON SR LN  
TALLAHASSEE, FL 32310 US

**New Principal Place of Business:**

**Current Mailing Address:**

7245 CLINTON HUDSON SR LN  
TALLAHASSEE, FL 32310 US

**New Mailing Address:**

**FEI Number:** 32-0200553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HILL, MORRIS E  
4464 CAMDEN RD  
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: D ( ) Delete  
Name: FRANKLIN, JOHN  
Address: 7245 CLINTON HUDSON SR LN  
City-St-Zip: TALLAHASSEE, FL 323109806 US

Title: D ( ) Delete  
Name: GRIFFIN, LINN A  
Address: 527 TUSKEGEE STREET  
City-St-Zip: TALLAHASSEE, FL 323106868 US

Title: D ( ) Delete  
Name: GILMORE, JERRY M  
Address: 1304 ELBERTA DRIVE  
City-St-Zip: TALLAHASSEE, FL 323044631 US

Title: D ( ) Delete  
Name: MONTGOMERY, BARBARA  
Address: 202 RIDGE ROAD  
City-St-Zip: TALLAHASSEE, FL 323107004 US

Title: D ( ) Delete  
Name: HEAD, GILBERT  
Address: 1420 CALLOWAY STREET  
City-St-Zip: TALLAHASSEE, FL 323041916 US

Title: D ( ) Delete  
Name: WOODBERRY, ROLAND JR  
Address: 2415 JIM LEE ROAD  
City-St-Zip: TALLAHASSEE, FL 323016741 US

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MORRIS E. HILL

AGEN

03/20/2009

Electronic Signature of Signing Officer or Director

Date