2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010981

FILED Jul 06, 2007 Secretary of State

Entity Name: BLACK PARTNERSHIP OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 35 WEST PINE STREET SUITE 220 ORLANDO, FL 32801 **New Mailing Address: Current Mailing Address:** 35 WEST PINE STREET SUITE 220 ORLANDO, FL 32801 FEI Number: 56-2627395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LYNUM, E JAUN SANCHEZ, DESIREE ESQUIRE % LYNUM & SANCHEZ, P.A % LYNUM & SANCHEZ, P.A 35 W PINE STREET, SÚITE 221 35 W PINE STREET, SUITE 221 ORLANDO, FL 32801 US ORLANDO, FL 32801 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: DESIREE SANCHEZ 07/06/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition ALI, JAMAK ALI, JAMAK Name: Name: 2327 MIDTOWN TERR, APT. 1518 Address: 800 SILVERTIP ROAD Address: City-St-Zip: ORLANDO, FL 32839 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: () Change () Addition FELDER, JOSEPH E Name: Name: Address: PO BOX 680611 Address: City-St-Zip: ORLANDO, FL 32868 City-St-Zip: Title: () Delete Title: (X) Change () Addition LYNUM, E. JUAN ESQUIRE LYNUM, E JUAN Name: Name: 411 ROCK LAKE DRIVE Address: 411 ROCK LAKE DRIVE Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32805 Title: () Delete Title: (X) Change () Addition SANCHEZ, DESIREE Name: Name: SANCHEZ, DESIREE ESQUIRE 524 PETERSON PLACE 2701 SEABREEZE COURT Address: Address: City-St-Zip: ORLANDO, FL 32805 City-St-Zip: ORLANDO, FL 32805 Title: Title: () Delete () Change () Addition STEVENS, PAUL Name: Name: 8016 ASPENCREST COURT Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: () Delete Title: () Change (X) Addition BIGELOW, MERCEDES ESQUIRE Name: Name: Address: Address: SUMMER BREEZE ROAD, FL 32822 City-St-Zip: 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: E. JUAN LYNUM, ESQUIRE CD 07/06/2007