

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003476

FILED
Feb 16, 2011
Secretary of State

Entity Name: PUTNAM COUNTY AFRICAN AMERICAN CULTURAL ARTS COUNCIL, INC.

Current Principal Place of Business:

1007 NORTH 15TH STREET
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1151
PALATKA, FL 32178

New Mailing Address:

FEI Number: 59-3193477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, LASANDRA
1424 OCEAN STREET
PALATKA, FL 32177 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
Name: SMITH, DOTHEA H
Address: PO BOX 273
City-St-Zip: PALATKA, FL 32178

Title: VP
Name: WRIGHT, KATHY
Address: 503 PALMETTO STREET
City-St-Zip: PALATKA, FL 32177

Title: VP
Name: WILLIAMS, ANGELA D
Address: 223 HOLLY LANE
City-St-Zip: PALATKA, FL 32177

Title: S
Name: ARCHER, SHEILA
Address: 406 LENORE AVENUE
City-St-Zip: INTERLACHEN, FL 32148

Title: FS
Name: FORD, DESIREE
Address: 123 BIG APPLE RD
City-St-Zip: EAST PALATKA, FL 32131

Title: T
Name: WILLIAMS, LASANDRA
Address: 1424 OCEAN ST
City-St-Zip: PALATKA, FL 32177

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: DOTHEA SMITH

P

02/16/2011

Electronic Signature of Signing Officer or Director

Date