

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004132

FILED
Jan 07, 2010
Secretary of State

Entity Name: THE CENTER FOR THE STUDY OF BLACK HOSPITAL HISTORY, INC.

Current Principal Place of Business:

9511 STAR VIEW LANE
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

9511 STAR VIEW LANE
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 61-1562844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESLEY, JR., NATHANIEL
9511 STAR VIEW LANE
TALLAHASSEE, FL 32309 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: PD
Name: WESLEY, JR.,
Address: 9511 STAR VIEW LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD
Name: WESLEY, SHEILA A
Address: 9511 STAR VIEW LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD
Name: LEE, ANDRE DR.
Address: 17515 W NINE MILE RD, SUITE 750
City-St-Zip: SOUTHFIELD, MI 48075

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: NATHANIEL WESLEY, JR.

PRES

01/07/2010

Electronic Signature of Signing Officer or Director

Date