

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005366

FILED
Feb 03, 2009
Secretary of State

Entity Name: THE NATIONAL ASSOCIATION OF MINORITY CONTRACTORS, INC. SOUTH FLORIDA CHAPTER

Current Principal Place of Business:

400 WEST ATLANTIC AVENUE, SUITE 2B
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

400 WEST ATLANTIC AVENUE, SUITE 2B
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 26-2603890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HATCHER, WILLIAM
400 WEST ATLANTIC AVENUE, SUITE 2B
DELRAY BEACH, FL 33444 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: HATCHER, WILLIAM
Address: 400 WEST ATLANTIC AVENUE, SUITE 2B
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP () Delete
Name: ROUSSEAU, HYDN
Address: 1315 53RD STREET, #3
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S () Delete
Name: GADSON, WANDA
Address: 145 NW 10TH AVE.
City-St-Zip: DELRAY BEACH, FL 33444

Title: T () Delete
Name: WILSON, JOHNNY
Address: 11077 VIA SIENE
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CHARLEZ, ANTONIO JR.
Address: 5243 1ST ROAD
City-St-Zip: LAKE WORTH, FL 33467

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

Title: T (X) Change () Addition
Name: SANCHEZ, MANUAL
Address: 1470 N CONGRESS AVE SUITE #119
City-St-Zip: WEST PALM BEACH, FL 33409

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: WILLIAM HATCHER

PRES

02/03/2009

Electronic Signature of Signing Officer or Director

Date