## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N19080

FILED Apr 14, 2009 Secretary of State

Entity Name: JACKSON COUNTY MINORITY BUSINESS ASSOCIATION INC

**Current Principal Place of Business: New Principal Place of Business:** 

2880-B ORANGE ST 2880 ORANGE ST. UNIT B MARIANNA, FL 32448 MARIANNA, FL 32448 US

**Current Mailing Address: New Mailing Address:** 

4170 CEDAR STREET 2880 ORANGE STREET UNIT B

MARIANNA, FL 32446 MARIANNA, FL 32448

FEI Number: 59-2775378 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:

KELLY, LEON BRYANT, ELMORE 2814 ORÁNGE ST. 3605 BUMPNOSE RD.

MARIANNA, FL 32446 MARIANNA, FL 32448 US 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: ELMORE BRYANT 04/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

MCNEALY, MINNIE PATTERSON, RICHARD A Name: Name:

4170 CEDAR STREET Address: P.O. 370 Address: MARIANNA, FL MALONE, FL 32445

City-St-Zip: City-St-Zip:

Title: PDT () Delete Title: (X) Change ( ) Addition Name: BRYANT, ELMORE Name: BRYANT, ELMORE

Address: 2814 ORANGE STREET Address: 2814 ORANGE STREET

City-St-Zip: MARIANNA, FL City-St-Zip: MARIANNA, FL

Title: () Delete Title: (X) Change ( ) Addition POLLOCK, ROSA Name: HAMILTON, LEA' Name:

4219 OLD COTTONDALE RD Address: Address: 4258 ELM STREET City-St-Zip: MARIANNA, FL City-St-Zip: MARIANNA, FL 324448

Title: VΡ ( ) Delete Title: (X) Change ( ) Addition

SYLVESTER, DANNY Name: Name: LONG, GWEN 4324 WOODBERRY RD. Address: Address: 3774 OLD US. RD City-St-Zip: MARIANNA, FL 32448 City-St-Zip: MARIANNA, FL 32446

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.

Ρ SIGNATURE: ELMORE BRYANT 04/14/2009