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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

FILED Jan 31, 1996 08:00 AM

Secretary of State

(12/95)

1996

CITY-ST-ZIP

DOCUMENT # N22650

(8)

MARTIN LUTHER KING, JR., COMMEMORATIVE CELEBRATI ON COMMITTEE OF PENSACOLA, INC.

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Principal Place of Business Mailing Address 29 SOUTH SPRING STREET 29 SOUTH SPRING STREET PENSACOLA FL 32501 PENSACOLA FL 32501 3a. Date of Last Report 3. Date Incorporated or Qualified 09/23/1987 03/10/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2862808 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zio Country Zin 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No 25 20 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name **BROWN, EUGENE** SAME 62 Street Address (P.O. Box Number is Not Acceptable) 1504 YAWL CIRCLE 83 PENSACOLA FL 32505 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE YOUNG, JAMES S., DR. 1.2 NAME NAME SAME 800 W. LEE STREET 1.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 14 CITY-ST-ZIP CITY - ST - ZIP DELETE 21 TITLE Change Addition TITLE COLEMAN, WILLIE M NAM! 22 NAME 1611 EAST FISHER 2.3 STREFT ADDRESS STREET ADDRESS PENSACOLA FL 2. 4 CITY-ST-ZIP CiTY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE NAME BROWN, EUGENE 3.2 NAME 1504 YAWL CIRCLE 3.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE VPD 4.1 TITLE JACKSON, ROBERT L. NAME 4 2 NAME 610 SPENCER AVENUE STREET ADDRESS 4.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Addition DELETE ☐ Change 5.1 TITLE TITLE NAME CARTLEDGE, JEWELL A 5.2 NAME 2403 CAVALLA LOOP STREET ADDRESS 5.3 STREET ADDRESS PENSACOLA FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change ■ Addition 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 63 STREET ADDRESS

64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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

SIGNATURE: E1146 BROWN 1/27/96 904-476-7519
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Destruce Phone #