



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N22650 1. Entity Name MARTIN LUTHER KING, JR., COMMEMORATIVE CELEBRATION COMMITTEE OF PENSACOLA, INC.				FILED 05 SEP 23 PM 4:46 SECRET, TALLAHASSEE, FL	
Principal Place of Business 29 SOUTH SPRING STREET PENSACOLA, FL 32501		Mailing Address 29 SOUTH SPRING STREET PENSACOLA, FL 32501		 09142005 No Chg-NP CR2E037 (10/03) 4. FEI Number 59-2862808 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
DO N New Phone # & Address: ACE 14 West Jordan Street Suite 2-E 850/437-0510					
6. Name BROWN, EUGENE 1504 YAWL CIRCLE PENSACOLA, FL 32505					
DO NOT WRITE IN THIS SPACE					
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$61.25 Due by October 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees 600059876356 9/23/05--01007--006 **61.25			
10. OFFICERS AND DIRECTORS					
TITLE	ED				
NAME	YOUNG, JAMES S DR				
STREET ADDRESS	800 W. LEE STREET				
CITY-ST-ZIP	PENSACOLA, FL 32505				
TITLE	TD				
NAME	COLEMAN, WILLIE M				
STREET ADDRESS	1611 EAST FISHER				
CITY-ST-ZIP	PENSACOLA, FL 32503				
TITLE	PD				
NAME	BROWN, EUGENE				
STREET ADDRESS	1504 YAWL CIRCLE				
CITY-ST-ZIP	PENSACOLA, FL 32505				
TITLE	VPD				
NAME	JACKSON, ROBERT L				
STREET ADDRESS	610 SPENCER AVENUE				
CITY-ST-ZIP	PENSACOLA, FL 32514				
TITLE	CS				
NAME	CARTLEDGE, JEWELL A				
STREET ADDRESS	2403 CAVALLA LOOP				
CITY-ST-ZIP	PENSACOLA, FL 32526				
TITLE	D				
NAME	BRYANT, MYLES ELDER				
STREET ADDRESS	720 SMILEY AVENUE				
CITY-ST-ZIP	PENSACOLA, FL 32514				
DO NOT WRITE IN THIS SPACE					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Eugene Brown <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
9 18 2005 <small>Date</small>					
850 437-0510 <small>Daytime Phone #</small>					