2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27763

FILED Sep 07, 2004 Secretary of State

Entity Name: VIRGIL HAWKINS BAR ASSOCIATION, INC.

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

175 5TH STREET SW SUITE 205 WINTER HAVEN, FL 33880

Current Mailing Address: New Mailing Address:

P.O. BOX 6495 P.O. BOX 821

LAKELAND, FL 33811 BARTOW, FL 33831 US

FEI Number: 59-3725721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEWIS, CEDRIC E

175 5TH STREET SW, SUIE 205

WINTER HAVEN, FL 33880 US

LEWIS, CEDRIC E

175 5TH STREET SW, SUITE 205

WINTER HAVEN, FL 33880 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: 09/07/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MALVEAUX, ARAMIS Name: DENMARK, CASSANDRA

 Address:
 255 N BROADWAY
 Address:
 455 N BROADWAY

 City-St-Zip:
 BARTOW, FL 33830
 City-St-Zip:
 BARTOW, FL 33830

Title: VP () Delete Title: VP (X) Change () Addition Name: DENMARK, CASSANDRA Name: MOORE, DANA

 Address:
 455 N BROADWAY AVE
 Address:
 255 N BROADWAY AVE

 City-St-Zip:
 BARTOW, FL 33830
 City-St-Zip:
 BARTOW, FL 33830

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

 Name:
 BARNER, REBECCA
 Name:
 MEEKS, KAREN

 Address:
 228 N WEBB RD
 Address:
 1125 E MAIN ST

 City-St-Zip:
 PLANT CITY, FL 33566
 City-St-Zip:
 BARTOW, FL 33830

Title: D () Delete Title: () Change () Addition

 Name:
 GLOVER, KEN
 Name:

 Address:
 505 MLK JR AVE
 Address:

 City-St-Zip:
 LAKELAND, FL 33810
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 MEEKS, KAREN I
 Name:

 Address:
 1125 E MAIN ST
 Address:

 City-St-Zip:
 BARTOW, FL 33830
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CASSANDRA DENMARK P 09/07/2004