## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

GORE, PAMELA C

2529 RALEIGH STREET HOLLYWOOD EL 33020 N31776

(0)

MARTIN LUTHER KING JR. COMMUNITY ADVISORY BOARD, INC. Principal Place of Business Mailing Address 2529 RALEIGH STREET HOLLYWOOD FL 33020 2529 RALEIGH STREET HOLLYWOOD FL 33020 04/18/1989 4. FEI Number 65-0156688 2. Principal Place of Business 2a. Mailing Address 5. Certificate of Status Desired 21 26

Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing 22 27 Trust Fund Contribution City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 26 Zip Country Country 8. This corporation owes or has paid the current year Intengible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent

**FILED** Feb 09 1998 8:00am Secretary of State



Yes

Street Address (P.O. Box Number is Not Acceptable)

Yes

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

(1066)11	00010					
			84 City		FL B5	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 tille if applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND		Registered Agent signature		DATE  TO OFFICERS AND DIRECT	700011140
TITLE	PD OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES	Cha	
	· ·				LI OK	Inge L AUGHION
NAME	GORE, PAMELA		1.2 NAME			
STREET ADDRESS	2529 RALEIGH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020	Decree	1.4 CITY-ST-ZIP			
TITLE	VO	☐ DELETE	2.1 TITLE		☐ Cha	nge 🔲 Addition
NAME	MURRAY, JAUNITA		2.2 NAME			
STREET ADDRESS	2345 DOUGLAS STREET		2.3 STREET ADDRESS		4.5	
CITY-ST-ZIP	HOLLYWOOD FL 33020		2. 4 CITY - ST - ZIP			
TITLE	<b>8D</b>	DELETE	3.1 TITLE		☐ Cha	nge 🔲 Addition
NAME	ash, Helena		3.2 NAME			
STREET ADDRESS	2321 FORREST STREET		3.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020		3.4. CITY-ST-ZIP			İ
TITLE	TD	DELETE	4.1 TITLE	W-1-1	Cha	nge Addition
NAME	Young, Nettie		4. 2 NAME			
STREET ADDRESS	2341 HOOD STREET		4.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Cha	nge 🔲 Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY+ ST - ZIP			
TITLE		DELETE	6.1 TITLE		☐ Cha	nge 🔲 Addition
NAME			6.2 NAME			İ
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
14. 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 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 appears in						

B1 Name