Jun 09 02 03:51p T. H. Poole, Sr.

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2002 8:00 am
Secretary of State
05-20-2002 90026 042 ****61.25

DOCUMENT # N34978

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DO NOT WRITE IN THIS SPACE

1. Entity Name

HARRY T. MOORE FUND - NAACP, INCORPORATED

Principal Place of Business	Mailing Address
P.O. BOX 1334 EUSTIS FL 32727	1107 BEECHER STREET LEESBURG FL 34748-3610

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2975723 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COLLETON, LARRY H 2300 EAST CONCORD ST ORLANDO FL 32803	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S POOLE, RENA D 1033 SMITH ST EUSTIS FL 32726	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dr. Charles Evans 851 Circle Dr. ~~Tallahassee, Fl. 32301~~	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PALMER, MARIE B 4294 NIMONS ST ORLANDO FL 32811	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Leon Russell 315 Court St.; Clearwater, Fl. 34616	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRUMMER, ESTELLA 1403 N ORANGE ST MT DORA FL 32757	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D T. H. Poole, Sr. P. O. Box 1334 Eustis, Fl. 32727	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, SAYNNE G 1205 MARSHALL CT EUSTIS FL 32726	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Shirley Johnson 3925 NW 186th.St Miami, Fl. 33055	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JENKINS, WHITFIELD 2200 NW 24TH RD OCALA FL 34475	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Althemese Barnes 2619 Summerwood Av. ~~Tallahassee, Fl. 32303~~	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C WILLIAMS, WILLIE 404 LIONEL ORLANDO FL 32805	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Marie B. Palmer Marie B. Palmer (Treas) 06/10/02 (407) 425-0608
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Marie B. Palmer 06/10/02 (407) 425-0608