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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N40039** (2)

1. Corporation Name

AFRICAN AMERICAN HERITAGE SOCIETY, INC.

Principal Place of Business

Mailing Address

% PENSACOLA CULTURAL CENTER
400 JEFFERSON ST. RM 204
PENSACOLA FL 32501

% PENSACOLA CULTURAL CENTER
400 JEFFERSON ST. RM 204
PENSACOLA FL 32501

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOWARD, CHERYL J
700 SOUTH PALAFOX ST
2850 N 12TH AVE
PENSACOLA FL 32501

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
238 E. Intendencia Street

83

84 City Pensacola

FL

85 Zip Code
32501

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

Cheryl J. Howard, Esq.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME COBY, ALVIN
STREET ADDRESS P.O. BOX 72910 N/A
CITY-ST-ZIP PENSACOLA FL 32501

TITLE DT
NAME HODGES, ELLIS CDR
STREET ADDRESS 4475 CESSNOCK DRIVE
CITY-ST-ZIP PENSACOLA FL 32514

TITLE D
NAME BOYD, JAMES DR
STREET ADDRESS 2280 NORTH 9TH AVENUE
CITY-ST-ZIP PENSACOLA FL 32503

TITLE D
NAME BANKSTON, JESSE
STREET ADDRESS 7601 NORTH 9TH AVE APT#155
CITY-ST-ZIP PENSACOLA FL 32514

TITLE D
NAME WILLS, ORASTINE
STREET ADDRESS 4910 LYNELL STREET
CITY-ST-ZIP PENSACOLA FL 32503

TITLE D
NAME SANCHEZ, WASHINGTON
STREET ADDRESS 5061 HIGH POINTE DR
CITY-ST-ZIP PENSACOLA FL 32505

1.1 TITLE DP
1.2 NAME COBY, ALVIN
1.3 STREET ADDRESS 12195 Sage Ave.
1.4 CITY-ST-ZIP Pensacola, FL 32507

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE D
3.2 NAME FRIEDRICH, DOUGLAS DR
3.3 STREET ADDRESS 11000 University Parkway
3.4 CITY-ST-ZIP Pensacola, FL 32501

4.1 TITLE D
4.2 NAME EPPS, LORNETTA DR
4.3 STREET ADDRESS 4560 Bohemia Dr.
4.4 CITY-ST-ZIP Pensacola, FL 32504

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE DVP
6.2 NAME SANCHEZ, WASHINGTON
6.3 STREET ADDRESS 5061 High Pointe Dr
6.4 CITY-ST-ZIP Pensacola, FL 32505

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

SIGNATURE:

Doris C. Munoz

Doris C. Munoz

4/30/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone # 0074640

CR2E037 (10/97)