

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N40039

FILED  
Sep 11, 2002  
Secretary of State

**Entity Name:** AFRICAN AMERICAN HERITAGE SOCIETY, INC.

**Current Principal Place of Business:**

200 CHURCH STREET  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

200 CHURCH STREET  
PENSACOLA, FL 32501

**New Mailing Address:**

**FEI Number:** 59-3022641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

EPPS, LORNETTA T M.D.  
2950 N 12TH AVE  
PENSACOLA, FL 325034004

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

EPPS, LORNETTA T M.D.  
1717 NORTH E STREET, SUITE 208  
PENSACOLA, FL 32501

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:

09/11/2002

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ERAZER, GAEL  
Address: 4336 GRANDPOINTE PL  
City-St-Zip: PENSACOLA, FL 32514

Title: D ( ) Delete  
Name: GRIEDRICH, DOUGLAS JR  
Address: 11000 UNIVRSITY PKWY  
City-St-Zip: PENSACOLA, FL 32501

Title: D ( ) Delete  
Name: EPPS, LORNETTA DR  
Address: 4560 BOHEMIA DR  
City-St-Zip: PENSACOLA, FL 32504

Title: D ( ) Delete  
Name: WILLS, ORASTINE  
Address: 4910 LYNELL STREET  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: MUNOZ, DORIS  
Address: 352 BUNKER HILL DR  
City-St-Zip: PENSACOLA, FL 32505

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GRIEDRICH, DOUGLAS JR  
Address: 11000 UNIVRSITY PKWY  
City-St-Zip: PENSACOLA, FL 32514

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: LORNETTA TAYLOR EPPS

DIR

09/11/2002

Electronic Signature of Signing Officer or Director

Date