

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40039

FILED
Apr 20, 2005
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:

200 CHURCH STREET
PENSACOLA, FL 32502

Current Mailing Address:

200 CHURCH STREET
PENSACOLA, FL 32501

New Mailing Address:

200 CHURCH STREET
PENSACOLA, FL 32502

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.
1717 NORTH E STREET, SUITE 208
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

Title: D () Delete
Name: FRIGURICH, DOUGLAS JR
Address: 11000 UNIVRSITY PKWY
City-St-Zip: PENSACOLA, FL 32514

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

Title: D () Delete
Name: WOOTEN, CORNELIUS
Address: 11000 UNIVERSITY PKWY
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: EPPS, LORNETTA DR
Address: 5912 CREEK SIDE CIRCLE
City-St-Zip: PENSACOLA, FL 32504

Title: D (X) Change () Addition
Name: GOLDSCHMIDT, KEITH
Address: 11000 UNIERSITY PARKWAY
City-St-Zip: PENSACOLA, FL 32514

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

DR

04/20/2005

Electronic Signature of Signing Officer or Director

Date