

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N42142 (2)
1. Corporation Name

NATIONAL FORUM FOR BLACK PUBLIC ADMINISTRATORS OF SOUTH FLORIDA - GREATER MIAMI CHAPTER, INC.



Principal Place of Business Mailing Address

1000 N.W. 62ND ST.
MIAMI FL 33130
US

P.O. BOX 012556
MIAMI FL 33101
US

3. Date Incorporated or Qualified **02/18/1991** 3a. Date of Last Report **05/01/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		59-2364093		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28		24		25	
Zip		Country		29		30	

9. Name and Address of Current Registered Agent

WATERS, ELBERT L
1000 N.W. 62ND ST.
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name	DANIELS, HATTIE
82 Street Address (P.O. Box Number is Not Acceptable)	777 Sharazad Blvd
83	
84 City	OPA LOCKA
85 Zip Code	FL 33054

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. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE HATTIE DANIELS *Hattie M. Daniels* *Karen Coplin*
Signature, typed or printed name of registered agent and title if applicable: *Karen Coplin* DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	WATERS, ELBERT L	1.2 NAME	DANIELS, HATTIE M.
STREET ADDRESS	1000 N.W. 62ND ST.	1.3 STREET ADDRESS	777 Sharazad Blvd
CITY-ST-ZIP	MIAMI FL 33130	1.4 CITY-ST-ZIP	Opa Locka, FL 33054
TITLE	VD	2.1 TITLE	VD
NAME	DANIELS, HATTIE M.	2.2 NAME	McGriff, Bernard
STREET ADDRESS	300 BISCAYNE BLVD. WAY #240	2.3 STREET ADDRESS	111 NW 1st Street, Ste 2930
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33128
TITLE	VD	3.1 TITLE	VD
NAME	WOOTEN, IRENE	3.2 NAME	Moorman, Rose
STREET ADDRESS	730 N.W. 176TH TERRACE	3.3 STREET ADDRESS	820 NW 172 Terrace
CITY-ST-ZIP	MIAMI FL 33169	3.4 CITY-ST-ZIP	Miami, FL 33169
TITLE	SD	4.1 TITLE	SD
NAME	COOPER-COPLIN, KAREN	4.2 NAME	Coplin-Cooper, Karen
STREET ADDRESS	275 N.W. 2ND ST. 3RD FLOOR	4.3 STREET ADDRESS	1000 NW 62 St
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33150
TITLE	TD	5.1 TITLE	TD
NAME	MOORMAN, ROSE	5.2 NAME	Bradley, Juanita
STREET ADDRESS	820 N.W. 172ND TERRACE	5.3 STREET ADDRESS	1431 NW 202 St
CITY-ST-ZIP	MIAMI FL 33169	5.4 CITY-ST-ZIP	Miami, FL 33169
TITLE	FSD	6.1 TITLE	FSD
NAME	ALBURY, MIRANDA	6.2 NAME	Sullivan, Kay
STREET ADDRESS	300 BISCAYNE BLVD. WAY #420	6.3 STREET ADDRESS	111 NW 1st Street, Ste 210
CITY-ST-ZIP	MIAMI FL 33131	6.4 CITY-ST-ZIP	Miami, FL 33128

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Hattie M. Daniels *Hattie M. Daniels* *Karen Coplin* **2/21/96 (305) 953-2819**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E037 (12/95)