

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995

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



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 6: 06

DOCUMENT # **N43114** (0)
1. Corporation Name
NORTHWEST COMMUNITY AND BUSINESS COUNCIL, INC.

Principal Place of Business Mailing Address
% BOOKER T. YOUNG, JR.
624 N WALKER ST.
LAKE WALES FL 33853

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/24/1991** 3a. Date of Last Report **05/01/1994**

4. FEI Number **59-311626** Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 Zip Country 25 Zip Country 29 Zip Country 30 Zip Country

9. Name and Address of Current Registered Agent

RIVERS, EDDYE J
541 LINCOLN AVE
LAKE WALES FL 33853

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Sections 607.0505, Florida Statutes.

SIGNATURE *Eddye J. Rivers* **Eddye J. Rivers, TD** **March 28, 1995**
DATE

12. OFFICERS AND DIRECTORS

TITLE	PO
NAME	YOUNG JR, BOOKER T, Jr.
STREET ADDRESS	201 NORTH AVE
CITY - ST - ZIP	LAKE WALES FL
TITLE	VP
NAME	WILSON, OZELL
STREET ADDRESS	2303 MAMOUTH GROVE ROAD
CITY - ST - ZIP	LAKES WALES FL
TITLE	TD
NAME	RIVERS, EDDYE J
STREET ADDRESS	541 LINCOLN AVE
CITY - ST - ZIP	LAKE WALES FL
TITLE	SD
NAME	ATMORE, LUCY G
STREET ADDRESS	420 W NORTH AVE
CITY - ST - ZIP	LAKE WALES FL
TITLE	D
NAME	JOHNSON, FRANK
STREET ADDRESS	204 W. NORTHSIDE DRIVE
CITY - ST - ZIP	LAKE WALES FL
TITLE	D
NAME	DELOACH, RICHARD
STREET ADDRESS	2224 EVI STREET
CITY - ST - ZIP	LAKE WALES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Lendell Staten Member	
1.3 STREET ADDRESS	529 Kissimmee St. Lake Wales, Fla.	
1.4 CITY - ST - ZIP	33853	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Willis Simmons Member	
2.3 STREET ADDRESS	401 "E" Street	
2.4 CITY - ST - ZIP	Lake Wales, Fla. 33853	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Benjamin Sewell Member	
3.3 STREET ADDRESS	2301 Mammoth Grove Rd.,	
3.4 CITY - ST - ZIP	Lake Wales, Fla. 33853	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Rachel Burton Member	
4.3 STREET ADDRESS	2002 Lisa Street	
4.4 CITY - ST - ZIP	Lake Wales, Fla. 33853	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Cassie Williams Member	
5.3 STREET ADDRESS	442 Booker Ave.	
5.4 CITY - ST - ZIP	Lake Wales, Fla. 33853	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Nathan Minton Member	
6.3 STREET ADDRESS	405 "E" Street	
6.4 CITY - ST - ZIP	Lake Wales, Fla. 33853	

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Booker T. Young Jr.* **Booker T. Young Jr.** **3/28/95** **676 - 6785**

SIGNATURE AND TYPED OR PRINTED NAME OF DOMESTIC OFFICER OR DIRECTOR