2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43627

FILED Mar 28, 2006 Secretary of State

Entity Name: THE CARTER G. WOODSON COMMITTEE FOR POSITIVE EDUCATION OF JACKSONVILLE, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 12001 P.O. BOX 12001

JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32209 US

Current Mailing Address: New Mailing Address:

P.O. BOX 12001(JAX.)

JACKSONVILLE, FL 32209 US

FEI Number: 59-3083697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BRYANT, STEPHANIE SHADIDI AMMA 4250 CARROLL DR. JACKSONVILLE, FL 32209 US

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:

SNATORE.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: TUNSILL, LAURENCE, S, R. Name: TUNSILL, LAURENCE, S, R.

Name: TUNSILL, LAURENCE, S, R. Name: TUNSILL, LAURENCE, S, R. Address: 1947 W. 30 ST. Address: 1947 W. 30 ST.

City-St-Zip: JACKSONVILLE, FL 32209 US

Name:COLEMAN, TANNAName:COLEMAN, TANNAAddress:2627 ARMSDALE RD NAddress:2627 ARMSDALE RD N

City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32218 US

Title: D () Delete Title: D (X) Change () Addition

Name: BRYANT, STEPAHNIE S., A. Name: BRYANT, STEPAHNIE S., A. Address: 4250 CARROLL DR. Address: 4250 CARROLL DR. City St. Zip: 1400/SON/ULLE EL LIS

City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL US

Title: D () Delete Title: O (X) Change () Addition

 Name:
 MARLEY, LORAINE
 Name:
 MARLEY, LORAINE

 Address:
 8452 ALLWINE COURT
 Address:
 8452 ALLWINE COURT

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 JACKSONVILLE, FL 32244 US

Name: BEYAH, MALACHI Name: BEYAH, MALACHI Address: PO BOX 12104 Address: PO BOX 12104

City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32209 US

Title: D () Delete Title: D (X) Change () Addition

Name:WILSON, ROBERTName:WILSON, ROBERTAddress:8612 OAKLEAF RD.Address:8612 OAKLEAF RD.

City-St-Zip: JACKSONVILLE, FL 32209 City-St-Zip: JACKSONVILLE, FL 32209 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STEPHANIE SHADIDI AMMA BRYANT PRES 03/28/2006

Electronic Signature of Signing Officer or Director

Date