

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N44787

1. Entity Name

MARTIN LUTHER KING JR. MEMORIAL COMMITTEE OF POM

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90100 016 ****61.25

Principal Place of Business

Mailing Address

P. O. BOX 883
 POMPANO BEACH FL 33061

P. O. BOX 883
 POMPANO BEACH FL 33061-0883

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0409926

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMS, NORBERT C
 5400 NW 64TH TERRACE
 LAUDERHILL FL 33319

Name *Joyce Jackson*

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

360 NW 14 ST

Pompano Bch FL

City

FL

Zip Code

33060

8. 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

Joyce Jackson

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/3/2000

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME PD JACKSON, JOYCE
 STREET ADDRESS 360 NW 14TH ST
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME VD WILLIAMS, NORBERT C
 STREET ADDRESS 5400 NW 64TH TERR
 CITY-ST-ZIP LAUDERHILL FL 33319

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME FSD PHILLIPS, EDWARD
 STREET ADDRESS 384 NW 19TH ST
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME TD PRICE, ERNESTINE
 STREET ADDRESS 1481 NW 3RD WAY
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME SD SWORN, MILLICENT J
 STREET ADDRESS 1508 NW 3RD WAY
 CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE Change Addition
 NAME *SD Tangel, Dixon*
 STREET ADDRESS *2540 NW 5 ST*
 CITY-ST-ZIP *Pompano Bch, FL 33069*

TITLE Delete
 NAME PD HUNTER, WALTER
 STREET ADDRESS 1250 NW 27TH AVE
 CITY-ST-ZIP POMPANO BEACH FL

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joyce Jackson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/2000 (954) 786-4111

Date

Daytime Phone #

CR2E037 (9/99)