

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47903

FILED
Feb 18, 2011
Secretary of State

Entity Name: FLORIDA CAUCUS OF BLACK STATE LEGISLATORS, INC.

Current Principal Place of Business:

400 N. ADAMS ST., STE. B
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

400 N. ADAMS ST., STE. B
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-3183127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMARR, ECITRYM S
400 NORTH ADAMS STREET
STE B
TALLAHASSEE, FL 32301 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: D
Name: HOLZENDORF, BETTY
Address: 400 NORTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: JONES, DARYL
Address: 400 NORTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: CHESTNUT, CYNTHIA
Address: 400 NORTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: LAMARR, ECITRYM
Address: 400 N. ADAMS ST., STE. B
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: GREENE, ADDIE
Address: 400 NORTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: JENINGS, ED JR.
Address: 400 NORTH ADAMS STREET
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: ECITRYM LAMARR

DIR.

02/18/2011

Electronic Signature of Signing Officer or Director

Date