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FILED

Apr 11 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1997**FLORIDA DEPARTMENT OF STATE  
**Sandra B. Northam**  
Secretary of State  
DIVISION OF CORPORATIONS**DOCUMENT # N93000005572 (3)**

1. Corporation Name

**OKALOOSA COUNTY AFRICAN-AMERICAN CULTURAL ASSOCIATION, INC (OCAACA)**

Principal Place of Business

**CHESTER PRUITT CENTER  
16 CARSON DR  
FT. WALTON BEACH FL 32548  
US**

Mailing Address

**PO BOX 2  
FT. WALTON BEACH FL 32549-0002  
US**3. Date Incorporated or Qualified  
**12/10/1993**3a. Date of Last Report  
**02/21/1996**

2. Principal Place of Business

**21 Troy State Univ.****22 81 Beal Pkwy SE****23 Ft. Walton Beach FL****24 32548****25 US**

2a. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

29

Country

30

4. FEI Number  
**59-3240068**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐**\$5.00** May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**ROBINSON, TANYA Y. *Broo*  
1642 N CAMPBELL DR.  
FT WALTON BCH FL 32547**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

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

SIGNATURE *Mary Florence*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME **PD  
MCNEIL, KENNETH G.**  
STREET ADDRESS **200 WHITE ST #3**  
CITY-ST-ZIP **NICEVILLE FL**TITLE ☐ DELETE  
NAME **VD  
KELLEY, LEROY**  
STREET ADDRESS **174 MARCIA DRIVE**  
CITY-ST-ZIP **MARY ESTHER FL**TITLE ☐ DELETE  
NAME **SD  
SEABROOKS, MICHELLE**  
STREET ADDRESS **310A CLIFFORD ST**  
CITY-ST-ZIP **FT. WALTON BEACH FL**TITLE ☐ DELETE  
NAME **TT  
FLORENCE, MARY**  
STREET ADDRESS **406 RUE DES TOURS**  
CITY-ST-ZIP **MARY ESTHER FL**TITLE ☐ DELETE  
NAME **D  
ROBINSON, TANYA Y.**  
STREET ADDRESS **1642 N CAMPBELL DR**  
CITY-ST-ZIP **FT WALTON BCH FL**TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME **PD  
Croons, Michael**  
1.3 STREET ADDRESS **825 ST DEL ORLEANS**  
1.4 CITY-ST-ZIP **MARY ESTHER FL 32569**2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME **VD  
Robert Elliott**  
2.3 STREET ADDRESS **105 W. 1st St. Pkwy 4**  
2.4 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 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: *Mary Florence*

Signature typed and printed name of signing officer or director

3-11-97

Date

Daytime Phone # 0074008

CR2E037 (9/96)