

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90140 049 ****61.25

DOCUMENT # N94000004043

1. Entity Name

AFRICAN AMERICAN MALE-FEMALE SUMMIT, INC.

Principal Place of Business

Mailing Address

1310 W. COLONIAL DRIVE
 SUITE 33
 ORLANDO FL 32804

P.O. BOX 555511
 ORLANDO FL 32855-5511

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3336433

Applied For

Not Applicable

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

ROLAND, D. NORVELLE
1310 W. COLONIAL DRIVE
SUITE 33
ORLANDO FL 32804

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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: PD Delete
 NAME: ROLAND, D. NORVELLE
 STREET ADDRESS: 1310 WEST COLONIAL DRIVE, SUITE 33
 CITY-ST-ZIP: ORLANDO FL 32804

TITLE: President Change Addition
 NAME: David Rucker
 STREET ADDRESS: 4557 Frisco Ct
 CITY-ST-ZIP: Orlando, FL 32808

TITLE: VD Delete
 NAME: MYERS, ROBERT JR
 STREET ADDRESS: P.O. BOX 940933 N/A
 CITY-ST-ZIP: MATLAND FL 32794

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 TITLE: Change Addition

TITLE: SD Delete
 NAME: DOYLE, STEWART W
 STREET ADDRESS: 2586 SOUTH CONWAY RD. #1120
 CITY-ST-ZIP: ORLANDO FL 32812

TITLE: Secretary Change Addition
 NAME: Gwendolyn Chavis
 STREET ADDRESS: P.O. Box 592772
 CITY-ST-ZIP: Orlando, FL 32859-2772

TITLE: OD Delete
 NAME: OTIS, CLARENCE
 STREET ADDRESS: 6100 LAKE ELLENOR DRIVE
 CITY-ST-ZIP: ORLANDO FL 32809

TITLE: Treasurer Change Addition
 NAME: Gregory W. Floyd
 STREET ADDRESS: 1118 Audubon Way
 CITY-ST-ZIP: Matland, FL 32751

TITLE: D Delete
 NAME: PORTER, DAVID D
 STREET ADDRESS: 2521 CARIBBEAN COURT
 CITY-ST-ZIP: ORLANDO FL 32805

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 TITLE: Change Addition

TITLE: D Delete
 NAME: JACK, MARY
 STREET ADDRESS: 9400 TURKEY LAKE RD
 CITY-ST-ZIP: ORLANDO FL 32819

TITLE: Change Addition
 NAME: Tongeha Milton
 STREET ADDRESS: 1102 Olympic Court
 CITY-ST-ZIP: Apopka, FL 32801

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:

Gregory W. Floyd
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/00
 Date

407.647.7121
 Daytime Phone #