

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90009 039 ****70.00

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

2. Principal Place of Business

4557 Frisco Circle

3. Mailing Address

P.O. Box 555511

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

Country

32808 US

Zip

Country

32855 US

4. FEI Number

59-3336433

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

David Rucker

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

4557 Frisco Circle

City

Orlando

FL

Zip

32808

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)

9/5/01

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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

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

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

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

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

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

TITLE D ☐ Delete
 NAME JACK, MARY
 STREET ADDRESS 9400 TURKEY LAKE RD
 CITY-ST-ZIP ORLANDO FL 32816

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE David Rucker ☐ Change ☒ Addition
 NAME
 STREET ADDRESS 4557 Frisco Circle
 CITY-ST-ZIP Orlando, FL 32808

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

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

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

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

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 registered trust or am 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:

SIGNATURE REQUIRED

9/5/01

401.858.8479

CR2007 (5/01)