


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # N94000005634
 1. Entity Name
THE AFRICAN-AMERICAN GRADUATES OF 1975, INC.



Principal Place of Business Mailing Address
 1210 FARGO STREET SOUTH 1210 FARGO STREET SOUTH
 ST. PETERSBURG, FL 33712 ST. PETERSBURG, FL 33712

DO NOT WRITE IN THIS SPACE



01112004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3275268	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERGUSON, RALPH JR
1210 FARGO STREET SO
ST PETERSBURG, FL 33711

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reconstituting) DATE _____

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D FERGUSON, RALPH 1210 FARGO STREET SOUTH ST. PETERSBURG, FL 33712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D GEORGE, KEITH F 4271 15TH AVENUE SOUTH ST PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D FRANKLIN, BERNITA 5455 21ST WAY SOUTH #1101 ST PETERSBURG, FL 33712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D WILLIAMS, TERESA G 3861 38TH STREET SOUTH ST. PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CRAWFORD, LUCRETIA 3820 1ST AVE SO SAINT PETERSBURG, FL 33711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/15/04-800003-006 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *Ralph Ferguson Jr* **RALPH FERGUSON JR** 1/11/04 (727) 338-8605

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #