

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001233

FILED
Mar 01, 2006
Secretary of State

Entity Name: BLACK EXECUTIVE FORUM, INC.

Current Principal Place of Business:

9101 SOUTH DIXIE HWY., 2ND FLOOR
MIAMI, FL 33156 US

New Principal Place of Business:

Current Mailing Address:

9101 SOUTH DIXIE HWY., 2ND FLOOR
MIAMI, FL 33156 US

New Mailing Address:

FEI Number: 65-0656667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GINN, DONNA L
9101 SOUTH DIXIE HWY., 2ND FLOOR
MIAMI, FL 33156 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: PD () Delete
Name: GINN, DONNA
Address: 9101 SOUTH DIXIE HWY., 2ND FLOOR
City-St-Zip: MIAMI, FL 33156 US

Title: TD () Delete
Name: CAREY, OLIVIA
Address: 9101 SOUTH DIXIE HWY., 2ND FLOOR
City-St-Zip: MIAMI, FL 33156 US

Title: VD (X) Delete
Name: BECKFORD, JOHN G
Address: 9101 SOUTH DIXIE HWY, 2ND FLOOR
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BECKFORD, JOHN G
Address: 9101 SOUTH DIXIE HWY., 2ND FLOOR
City-St-Zip: MIAMI, FL 33156 US

Title: TSR (X) Change () Addition
Name: JOHNSON, FRANCINE
Address: 9101 SOUTH DIXIE HWY., 2ND FLOOR
City-St-Zip: MIAMI, FL 33156 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN G BECKFORD

PD

03/01/2006

Electronic Signature of Signing Officer or Director

Date