

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003473

FILED
Aug 13, 2009
Secretary of State

Entity Name: VIRGIL HAWKINS CIVIL RIGHTS FOUNDATION, INC.

Current Principal Place of Business:

1033 SMITH STREET
EUSTIS, FL 32726

New Principal Place of Business:

Current Mailing Address:

609 W. HORATIO ST
TAMPA, FL 33606

New Mailing Address:

P O BOX 87
ORLANDO, FL 32802

FEI Number: 59-3444469 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HERMAN, HARLEY S
609 W. HORATIO ST
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

HERMAN, HARLEY S
332 N. MAGNOLIA AVE.
ORLANDO, FL 32801 US

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:

08/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LIVINGSTON, HARRIET
Address: P O BOX 262 N/A
City-St-Zip: OKAHUMPKA, FL 34762

Title: DM () Delete
Name: HERMAN, HARLEY S
Address: 609 W. HORATIO ST
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: MATHIS, ANNE
Address: 2100 NW 21ST STREET
City-St-Zip: OCAL, FL 34475

Title: D () Delete
Name: REDDICK, ALZO J
Address: 4562 S ORANGE BLSM TR
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: ROBERTS-BURKE, BERYL
Address: 8340 NE 2 AVE STE 212
City-St-Zip: MIAMI, FL 331383807

Title: D () Delete
Name: POOLE, T.H. SR.
Address: P.O. BOX 1334
City-St-Zip: EUSTIS, FL 32727

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DM (X) Change () Addition
Name: HERMAN, HARLEY S
Address: 332 N. MAGNOLIA AVE
City-St-Zip: ORLANDO, FL 32801

Title: D (X) Change () Addition
Name: MATHIS, ANNE
Address: 2100 NW 21ST STREET
City-St-Zip: OCALA, FL 34475

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: HARLEY S. HERMAN

DM

08/13/2009

Electronic Signature of Signing Officer or Director

Date