

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004121

FILED
Apr 14, 2010
Secretary of State

Entity Name: HIWAY PARK BLACK BUSINESSMEN ASSOC. INC.

Current Principal Place of Business:

141 JOSEPHINE AVENUE
LAKE PLACID, FL 33852

New Principal Place of Business:

Current Mailing Address:

141 JOSEPHINE AVENUE
LAKE PLACID, FL 33852

New Mailing Address:

FEI Number: 65-0704311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEATHERS, DEBORAH A CEO
1811 SANDTRAP COURT
SEBRING, FL 33872 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: DP
Name: KEMP, DANIEL
Address: 100 COCHRAN DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: VPD
Name: RADER, ROBERT
Address: 4042 PLACID LAKES
City-St-Zip: LAKE PLACID, FL 33852

Title: SD
Name: BRANCH, FRANK
Address: 101 VISION STREET
City-St-Zip: LAKE PLACID, FL 33852

Title: TD
Name: WILLIAMS, ORTLAND
Address: 117 TAYLOR STREET
City-St-Zip: LAKE PLACID, FL 33852

Title: D
Name: WILLIAM, ROBERT LEE JR
Address: 114 COCHRAN DRIVE
City-St-Zip: LAKE PLACID, FL 33852

Title: CEO
Name: WEATHERS, DEBORAH
Address: 1811 SANDTRAP COURT
City-St-Zip: SEBRING, FL 33872

I hereby 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 all other like empowered.

SIGNATURE: DEBORAH WEATHERS

CEO

04/14/2010

Electronic Signature of Signing Officer or Director

Date