

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001385

FILED
Apr 13, 2012
Secretary of State

Entity Name: BLACK BOTTOM/SPRINGFIELD HUMAN DEVELOPMENT CORPORATION

Current Principal Place of Business:

485 W. FIRST STREET
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

485 W. FIRST STREET
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-3466150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHIM, HENRY T REV.
485 W FIRST STREET
JACKSONVILLE, FL 32202 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: CD
Name: RHIM, H.T. (PASTOR)
Address: 485 WEST 1ST STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: MCKINNEY, REGINALD
Address: 6507 W. BEAVER STREET
City-St-Zip: JACKSONVILLE, FL 32254

Title: D
Name: COLEMAN, A.B. III
Address: 5660 MONCRIEF ROAD
City-St-Zip: JACKSONVILLE, FL 32209

Title: SD
Name: HUTCHINSON, PATRICIA A
Address: 8317 DELAWARE AVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: D
Name: GREEN-COBB, LA TASHA
Address: 3212 CARIBBEAN DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

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: PATRICIA A. HUTCHINSON

SD

04/13/2012

Electronic Signature of Signing Officer or Director

Date