## 2001 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N9700006719

1. Entity Name

NATIONAL COALITION OF 100 BLACK WOMEN, INC. JACK

					(   44   )					
Principal Plac	ce of Business		Mailing Address							
900 UNIVERSITY BLVD N. SUITE 200 JACKSONVILLE FL 32211		P.O. BOX 2524 JACKSONVILLE FL 32203			1 200(110) 010 10	ii (2011 9811) 88211 i	2011) 68:11 361	( <b>G K</b> ( ) ( ) ( ) ( ) ( ) ( ) ( )	2010 (02) (30)	
2. Principal Place of Business			3. Mailing Address	*	<u> </u>					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			٠.	DO NOT WRITE	E IN THIS SE	PACE	
City & Sta	te		City & State		4. F	El Number 59	3475828		<u> </u>	pplied For ot Applicable
Zip		Country	Zip	Country	<b>5.</b> C	Certificate of Sta	tus Desired		8.75 Add	
	6. Name	and Address of Current	Registered Agent		7. N	ame and Addr	ess of New Re		•	<del></del>
				Name					=	
JACKSON, HELEN D 8008 WHISPER LAKE LANE EAST PONTE VEDRA BEACH FL 32082				Street Address			ot Acceptable)			
				City	•			FL	Zip Cod	e
8. The above	e named entity	submits this statement to	or the purpose of changing its	registered office	or registered age	ent, or both, in ti	ne state of Flori	ida. '   n U)	10	
SIGNATURE		Dela D	Jackso					121/	0/	
After Sept	FILE NOW:	FEE IS \$61.25 2001, min. will be \$2	9. Election Car 236.25 Trust Fund (	E: Registered Apent sign mpaign Financing Contribution.	\$5.0 Added	0 May Be	De	DATE DATE	t of State	<b>;</b>
	FILE NOW: ember 12, 2	FEE IS \$61.25	9. Election Car Trust Fund (	mpalgn Financing	S5.0 Added	May Be d to Fees	De	partmen	t of State	<b>;</b>
After Sept	FILE NOW: ember 12, 2 -PD -JAMES, VI -8483 NEW	FEE IS \$61.25 2001, min. will be \$2 OFFICERS AND DIF FRONICA S	9. Election Car Trust Fund (	mpalgn Financing Contribution.	S5.0 Added	May Be d to Fees  ONS/CHANGE	De S TO OFFICER:	s and diri	t of State  ECTORS IN  Change	10 Addition
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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)(i), 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:** 

- Offichment 12030

August 24, 2001

Florida Department Of State Divisions of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl 32302-1500

Subject: National Coalition Of 100 Black Women Inc. Jacksonville Chapter

Reference Number: N97000006719

Please be advised, that you received our annual report /uniform business report and a check totaling \$61.25; however, the status of this report has not been filed. During a telephone conversation August 23, 2001, when I was following up on the status of the report, I was informed that the report was returned for the following corrections(s):

Florida nonprofit corporations are required to have at least 3 directors. Therefore, we need to place a "D" beside the names and business addresses of each director.

After the corrections have been made we should return the report within 30 days. Since we did not receive the returned report, I was instructed to use the 2<sup>nd</sup> form that we received for the corrections and send this cover letter.

Gerald Minnifield