

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90034 029 ****61.25

DOCUMENT # N97000006779

1. Entity Name _____

EUSTIS AFRICAN AMERICAN HERITAGE COMMITTEE, INC.



Principal Place of Business

**810 LIBERTY STREET
EUSTIS FL 32727**

Mailing Address

**POST OFFICE BOX 114
EUSTIS FL 32727**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JACKSON & VAUGHAN GROUP, INC.
1325 S. CONGRESS AVENUE
3202
BOYNTON BEACH FL 34426**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P MITCHELL, VIVIAN C**
STREET ADDRESS **810 LIBERTY STREET**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Delete
NAME **VP CARTER, JUDY**
STREET ADDRESS **814 LIBERTY STREET**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Delete
NAME **S CAMERON, KIMBERLY**
STREET ADDRESS **1308 LOUIS CT**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Delete
NAME **T PERDUE, SANDRA**
STREET ADDRESS **706 E. McDONALD AVE**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Delete
NAME **D MANNING, GWENDOLYN M**
STREET ADDRESS **715 LIBERTY STREET**
CITY-ST-ZIP **EUSTIS FL 32726**

TITLE ☐ Delete
NAME **D PARKS, NICIE A**
STREET ADDRESS **1110 SOUTH STREET**
CITY-ST-ZIP **EUSTIS FL 32726**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME **Director Patricia A. Miller**
STREET ADDRESS **201 Doane Ave,**
CITY-ST-ZIP **Eustis, FL 32726**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Gwendolyn M. Manning

Gwendolyn M. Manning

4/5/07 (352) 589-2582

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Telephone Phone #