

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90447 031 ****61.25

DOCUMENT # N98000001135

1. Entity Name
RAFORD AND PHELP FAMILY REUNION, INC.



Principal Place of Business
**5201 WILEY STREET
HOLLYWOOD, FL 33021**

Mailing Address
**5201 WILEY STREET
HOLLYWOOD, FL 33021**

50015030



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04032006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
65-0818305

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RAFORD, CLARENCE J SR
5201 WILEY STREET
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

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

**Filing Fee is \$61.25
Due by May 1, 2006**

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 **S** ☐ Delete
NAME **MOORE, ANNIE LEE**
STREET ADDRESS **2710 SW 54TH AVE**
CITY-ST-ZIP **HOLLYWOOD, FL 33023**

TITLE **VP** ☐ Delete
NAME **BUSSEX, MICHAEL**
STREET ADDRESS **6911 SW 10TH CT**
CITY-ST-ZIP **NORTH LAUDERDALE, FL 33868**

TITLE **T** ☐ Delete
NAME **RAYFORD, ANNIE BELL**
STREET ADDRESS **1140 SULTAN AVE**
CITY-ST-ZIP **OPA LOCKA, FL 33054**

TITLE **AS** ☐ Delete
NAME **ROSS, CATHY**
STREET ADDRESS **2710 S.W. 54TH AVE**
CITY-ST-ZIP **HOLLYWOOD, FL 33023**

TITLE **ST** ☐ Delete
NAME **RAFORD, ALTHENA**
STREET ADDRESS **5201 WILEY STREET**
CITY-ST-ZIP **HOLLYWOOD, FL 33021**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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CITY-ST-ZIP

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

Clarence J. Raford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-06
Date

(954)987-7433
Daytime Phone #