2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001135

FILED Jun 16, 2008 Secretary of State

Entity Name: RAFORD AND PHELP FAMILY REUNION, INC.

Current B	ringing Place of Puginess	Now Princ	sinal Blace of Business	
5201 WILE	rincipal Place of Business: EY STREET DOD, FL 33021	New FIIIC	cipal Place of Business:	
Current M	ailing Address:	New Maili	New Mailing Address:	
	EY STREET DOD, FL 33021			
In accordan	: 65-0818305 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not recei Address of Current Registered Agent:	-	()	
RAFORD, 5201 WILE HOLLYWO The above	CLARENCE J SR SY STREET DOD, FL 33021 US named entity submits this statement for the purpose of Florida.			
SIGNATUF				
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	S () Delete MOORE, ANNIE LEE 2710 SW 54TH AVE HOLLYWOOD, FL 33023	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete BUSSEX, MICHAEL 6911 SW 10TH CT NORTH LAUDERDALE, FL 33868	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition BUSSEY, MICHAEL 6911 SW 10TH CT NORTH LAUDERDALE, FL 33868	
Title: Name: Address: City-St-Zip:	T () Delete RAYFORD, ANNIE BELL 1140 SULTAN AVE OPA LOCKA, FL 33054	Title: Name: Address: City-St-Zip:	T (X) Change () Addition RAFORD, ANNIE BELL 1140 SULTAN AVE OPA LOCKA, FL 33054	
Title: Name: Address: City-St-Zip:	AS () Delete ROSS, CATHY 2710 S.W. 54TH AVE HOLLYWOOD, FL 33023	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Delete RAFORD, ALTHENA 5201 WILEY STREET HOLLYWOOD, FL 33021	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	P () Change (X) Addition CLARANCE, RAFORD J SR 5201 WILEY STREET HOLLYWOOD, FL 33021	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CLARANCE J. RAFORD SR P 06/16/2008