

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90465 011 \*\*\*\*61.25

**DOCUMENT # N99000000374**

1. Entity Name

**ST. PETERSBURG AREA BLACK CHAMBER OF COMMERCE IN C.**



Principal Place of Business

**1950 1ST AVENUE NORTH  
SUITE 211/212  
ST. PETERSBURG FL 33713  
US**

Mailing Address

**1950 1ST AVENUE NORTH  
SUITE 211/212  
ST. PETERSBURG FL 33713  
US**

2. Principal Place of Business

**1950 1st Avenue North**

3. Mailing Address

**1950 1st Avenue North**

Suite, Apt. #, etc.

**Suite 212**

Suite, Apt. #, etc.

**Suite 212**

City & State

**St. Petersburg, FL**

City & State

**St. Petersburg, FL**

Zip

**33713**

Country

**US**

Zip

**33713**

Country

**US**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3553939**

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**WILLIAMS, LORIAN S**

**1950 1ST AVENUE NORTH  
SUITE 211/212  
ST. PETERSBURG FL 33713**

7. Name and Address of New Registered Agent

**Christina Brown**

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

**1950 1st Avenue North, Suite 212**

**St. Petersburg**

**FL**

Zip Code

**33713**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, of 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**

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 **VSD**  
NAME **WASHINGTON, GWENDOLYN**  
STREET ADDRESS **2612 GRANADA CIRCLE W**  
CITY-ST-ZIP **ST. PETERSBURG FL 33712**  
☒ Delete

TITLE **CD**  
NAME **DONALDSON, RONALD**  
STREET ADDRESS **2067 1ST AVENUE NORTH**  
CITY-ST-ZIP **ST. PETERSBURG FL 33713**  
☒ Delete

TITLE **TD**  
NAME **THOMAS, FLORAN**  
STREET ADDRESS **1714 WEST CASS ST.**  
CITY-ST-ZIP **TAMPA FL 33606**  
☐ Delete

TITLE **VCD**  
NAME **COX, GENA**  
STREET ADDRESS **2519 MCMULLEN BOOTH RD.M #510-18**  
CITY-ST-ZIP **CLEARWATER FL 33761**  
☒ Delete

TITLE **SD**  
NAME **HUTCRAFT, MARY**  
STREET ADDRESS **430 S. GULFVIEW BLVD.**  
CITY-ST-ZIP **CLEARWATER FL 33767**  
☒ Delete

TITLE **D**  
NAME **WILLIAMS, LORIAN S**  
STREET ADDRESS **2620 MIKOL TERRACE**  
CITY-ST-ZIP **ST. PETERSBURG FL 33712**  
☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CD**  
NAME **David Carmena**  
STREET ADDRESS **1309 Horsemint Lane**  
CITY-ST-ZIP **Tampa, FL 33543**  
☒ Change ☒ Addition

TITLE **VCD**  
NAME **Crystal Pruitt**  
STREET ADDRESS **3813 Manatee DRIVE SE**  
CITY-ST-ZIP **St. Petersburg, FL 33705**  
☐ Change ☒ Addition

TITLE **SD**  
NAME **Barry McIntosh**  
STREET ADDRESS **2500 Dr. ML King St. South**  
CITY-ST-ZIP **St. Petersburg, FL 33705**  
☐ Change ☐ Addition

TITLE **D**  
NAME **Lisa Speights**  
STREET ADDRESS **1955 1st Ave. No. # 101**  
CITY-ST-ZIP **St. Petersburg, FL 33713**  
☐ Change ☒ Addition

TITLE **D**  
NAME **Ronda Paramore**  
STREET ADDRESS **1114 Caliente Dr.**  
CITY-ST-ZIP **Brandon, FL 33511**  
☐ Change ☒ Addition

CR2E037 (10/02)

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:

**SIGNATURE REQUIRED**

**1/8/03**

**813-221-5711**