

**T02000000754**

John G. Riley  
History & Culture Inc.  
Requester's Name

PO Box 4261  
Address

Tallahassee FL 32315  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1. \_\_\_\_\_  
(Corporation Name) (Document #)
- 2. \_\_\_\_\_  
(Corporation Name) (Document #)
- 3. \_\_\_\_\_  
(Corporation Name) (Document #)
- 4. \_\_\_\_\_  
(Corporation Name) (Document #)

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 02 JUN 24 AM 9:54  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

- Walk in
- Pick up time \_\_\_\_\_
- Certified Copy
- Certificate of Status
- Mail out
- Will wait
- Photocopy

**NEW FILINGS**

- Profit
- Not for Profit
- Limited Liability

**AMENDMENTS**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

700005927857--5  
-06/24/02--01048--008  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Name  Domestication  
Availability  Other

**OTHER FILINGS**

Update  Annual Report  
 Fictitious Name

Updater  
Verifier

Acknowledgement DCC

W. P. Verifier DCC

CR2E051(7/97)

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

May 1, 2002

JOHN G. RILEY  
HISTORY & CULTURE, INC.  
P.O. BOX 4261  
TALLAHASSEE, FL 32315

SUBJECT: AFRICAN AMERICAN HERITAGE PRESERVATION CONFERENCE  
Ref. Number: W02000012383

We have received your document for AFRICAN AMERICAN HERITAGE PRESERVATION CONFERENCE, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

In Part II(1) a & b we need a month, a day, and a year for the date the mark was first used anywhere and for the date it was first used in Florida.

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: AFRICAN AMERICAN HERITAGE, PRESERVATION, CONFERENCE

The notary public's acknowledgement is incomplete. The seal, signature, and expiration date must be affixed. A notary public cannot notarize his own signature.

Please delete everything from part three except what it to be registered.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 602A00026807

APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

TO: Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:  
John G. Riley Center/Museum of African American  
History & Culture Inc., P.O. Box 4286  
Tallahassee, Fl 32315.

( 850 ) 681-7881  
Daytime Telephone number

FILED  
OCT 24 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PART I

1. (a) Applicant's name: John G. Riley Center/Museum of African American History & Culture Inc.

(b) Applicant's business address: 419 East Jefferson Street

Tallahassee, Fl 32311  
City/State/Zip

(c) Applicant's telephone number: ( 850 ) 681-7881

Individual  Corporation  Joint Venture  Other:  
 General Partnership  Limited Partnership  Union

If other than an individual,

(1) Florida registration number: 1998000003099 (2) Domicile State: \_\_\_\_\_

(3) Federal Employer Identification Number: 59-3518113

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:  
(i.e., furniture moving services, diaper services, house painting services, etc.)

Florida  
African American Heritage Preservation Conference - educational services.

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:  
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

Training, technical assistance, consultation.

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements, brochures, etc.)

On conference announcements, in brochures, newspaper and radio advertisement, publicity, promotional items.

(Continued)

d) The class(es) in which goods or services fall:

Education - 41

PART II

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: 1997 (January 23) (b) Date first used in Florida: 1997 (January 23)

PART III

1. The mark to be registered is: (If logo/design is included, please give brief written description which must be 25 words or less.)

The African American Heritage Preservation Conference

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

English Translation

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "African American Heritage, Preservation, Conference" APART FROM THE MARK AS SHOWN.

I, Althemese Barnes, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

John B. Riley Center/Museum of African American History & Culture Inc.

Typed or printed name of applicant

Althemese Barnes, Executive Director

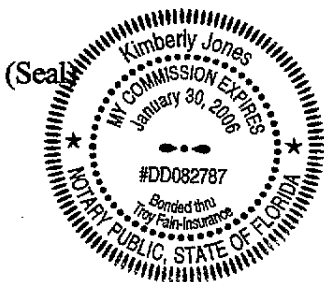
Applicant's signature or authorized person's signature (List name and title)

STATE OF Florida

COUNTY OF Leon

On this 24th day of June, 2000, Althemese Barnes personally appeared before me,

[X] who is personally known to me [ ] whose identity I proved on the basis of



Kimberly Jones

Notary Public Signature

Kimberly Jones

Notary's Printed Name

My Commission Expires: 1/30/06

FEE: \$87.50 per class

*Riley House Museum of African  
American History & Culture*

*Announces:*

**the SECOND ANNUAL FLORIDA  
STATE-WIDE AFRICAN AMERICAN  
HERITAGE PRESERVATION  
CONFERENCE**

**February 3-6, 1999  
Tallahassee; Double Tree Hotel**

Topics: Architecture, Archaeology, Documents  
Conservation, African American Burial  
Grounds, Genealogy Research,  
Curriculum Infusion and Exhibit Design

Receptions Speakers Tours Vendors

*For information call:(850)681-7881*

Bahama Village In Key West Photo by L. Wells-Bowfe

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