

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740791

FILED
Mar 15, 2013
Secretary of State
CC5711340577

Entity Name: THE BLACK ARCHIVES, HISTORY AND RESEARCH
FOUNDATION OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

5400 NW 22ND AVENUE
BUILDING C, SUITE 101
MIAMI, FL 33142

Current Mailing Address:

5400 NW 22ND AVENUE
BUILDING C, SUITE 101
MIAMI, FL 33142 US

FEI Number: 59-1808272

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARBER, TIMOTHY A
5400 NW 22ND AVENUE
BLDG C STE 101, BOX 300
MIAMI, FL 33142 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CH
Name WELTERS, GWENDOLYN H
Address 5400 NW 22 AVENUE BLDG C STE 101
City-State-Zip: MIAMI FL 33142

Title 1VCH
Name REEVES, GARTH CSR
Address 5400 NW 22 AVENUE BLDG C STE 101
City-State-Zip: MIAMI FL 33142

Title TREA
Name HENRIQUEZ, STEVEN J
Address 5400 NW 22 AVENUE BLDG C STE 101
City-State-Zip: MIAMI FL 33142

Title ED
Name BARBER, TIMOTHY A
Address 5400 NW 22 AVENUE, BLDG C, STE
101, BOX 30
City-State-Zip: MIAMI FL 33142

Title EC
Name FIELDS, DOROTHY JDR.
Address 5400 NW 22 AVENUE BLDG C STE 101
City-State-Zip: MIAMI FL 33142

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY A. BARBER

EXECUTIVE DIRECTOR

03/15/2013

Electronic Signature of Signing Officer/Director Detail

Date