

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009562

Entity Name: FAMU/LINCOLN HIGH SCHOOL OF CLASSES OF 1959, INC.**Current Principal Place of Business:**1304 ELBERTA DRIVE
TALLAHASSEE, FL 32304**Current Mailing Address:**1304 ELBERTA DRIVE
TALLAHASSEE, FL 32304 US**FEI Number:** 32-0200553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILL, MORRIS E
8048 VETERANS MEMORIAL DRIVE
TALLAHASSEE, FL 32309 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	D
Name	FRANKLIN, JOHN
Address	7245 CLINTON HUDSON SR LN
City-State-Zip:	TALLAHASSEE FL 32310-9806

Title	D
Name	GRIFFIN, LINNANN
Address	527 TUSKEGEE STREET
City-State-Zip:	TALLAHASSEE FL 32310-6868

Title	D
Name	GILMORE, JERRY M
Address	1304 ELBERTA DRIVE
City-State-Zip:	TALLAHASSEE FL 32304-4631

Title	D
Name	MONTGOMERY, BARBARA
Address	202 RIDGE ROAD
City-State-Zip:	TALLAHASSEE FL 32310-7004

Title	D
Name	JOHNSON, WYNEVA A
Address	724 COBLE DRIVE
City-State-Zip:	TALLAHASSEE FL 32301-1916

Title	D
Name	WOODBERRY, ROLAND JR
Address	2415 JIM LEE ROAD
City-State-Zip:	TALLAHASSEE FL 32301-6741

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: JOHN FRANKLIN**PRESIDENT****02/10/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date