

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004878

Entity Name: CITY OF MIAMI BLACK POLICE PRECINCT AND COURTHOUSE MUSEUM, INC.**FILED**
Mar 18, 2020
Secretary of State
3527019433CC**Current Principal Place of Business:**480 NW 11TH ST
MIAMI, FL 33136**Current Mailing Address:**P.O. BOX 011874
MIAMI, FL 33101-1874 US**FEI Number: 27-2553769****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MARSHALL, JAMES H JR.
480 N.W. 11 STREET
MIAMI, FL 33101 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: JAMES H. MARSHALL, JR.****03/18/2020**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|------------------------|
| Title | PRESIDENT |
| Name | MARSHALL, JAMES H. JR. |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

| | |
|-----------------|---------------------|
| Title | VP. |
| Name | STEWART, EROL A |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

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|-----------------|------------------------|
| Title | S |
| Name | JACKSON, WILLIE R. JR. |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

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|-----------------|---------------------|
| Title | T |
| Name | NAJIY, ANITA |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

| | |
|-----------------|-------------------------|
| Title | SERGEANT-AT-ARMS, OTHER |
| Name | DEBORAH PAYNE |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

| | |
|-----------------|---------------------|
| Title | PARLIAMENTARIAN |
| Name | SANON, DANIEL |
| Address | P.O. BOX 011874 |
| City-State-Zip: | MIAMI FL 33101-1874 |

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: WILLIE R. JACKSON, JR.**SECRETARY****03/18/2020**

Electronic Signature of Signing Officer/Director Detail

Date