

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000006799

**FILED  
Apr 16, 2021  
Secretary of State  
3722946586CC**

**Entity Name:** HISTORIC JAMESTOWN COLORED SCHOOL MUSEUM,  
INCORPORATED

**Current Principal Place of Business:**

2170 JAMES DR.  
OVIEDO, FL 32765

**Current Mailing Address:**

POST BOX 621589  
OVIEDO, FL 32762 US

**FEI Number: 84-2386122**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MILLER, GRACIA M  
150 ZENITH POINTE  
GENEVA, FL 32732 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 P  
Name SMITH, JUDITH D  
Address 938 EAST BROADWAY ST.  
City-State-Zip: OVIEDO FL 32765

Title VP  
Name MULLER-SMITH, KELLY  
Address 197 NICOLET DR.  
City-State-Zip: MEMPHIS TN 38109

Title SEC  
Name MILLER, GRACIA M  
Address 150 ZENITH POINTE  
City-State-Zip: GENEVA FL 32732

Title TREA  
Name DAVIS, ARTHUR B  
Address 6013 BROKEN ARROW ST  
City-State-Zip: SIMI VALLEY CA 93063

Title A.TR  
Name GAVIN, ANNIE J  
Address 262 ACADEMY AVENUE  
City-State-Zip: OVIEDO FL 32765

*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: ANNIE J. GAVIN**

**ASSISTANT TREASURER 04/16/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date