

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004046

Entity Name: THE NATIONAL COALITION OF 100 BLACK WOMEN
PENSACOLA CHAPTER, INC.

FILED
Feb 29, 2024
Secretary of State
7042136802CC

Current Principal Place of Business:

201 GETTYSBURG DRIVE
PENSACOLA, FL 32503

Current Mailing Address:

P.O. BOX 10291
PENSACOLA, FL 32524-0291 US

FEI Number: 59-3178169

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NATIONAL COALITION OF 100 BLACK WOMEN, INC., PENSACOLA CHAPTER
201 GETTYSBURG DRIVE
PENSACOLA, FL 32503 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: LINDA ROBINSON

02/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name ROBINSON, LINDA P
Address 201 GETTYSBURG DRIVE
City-State-Zip: PENSACOLA FL 32503

Title 1VP
Name WALLACE, KATRINA
Address 227 MAPLEWOOD DR.
City-State-Zip: ATMORE AL 36502

Title 2ND
Name ALSTON, CORNITA
Address 2722 CARRINGTON LAKE BLVD.
City-State-Zip: PENSACOLA FL 32533

Title 3VP
Name HARRIS LEWIS, CHRISTINE
Address 245 SPRINGWOOD DRIVE
City-State-Zip: GREENVILLE AL 36037

Title SEC
Name MIXON, LATASHA
Address 1951 W. BLOUNT ST. APT. 406
City-State-Zip: PENSACOLA FL 32501

Title TREASURER
Name PRESLEY, LOLA R.
Address 6200 VICKSBURG DR.
City-State-Zip: PENSACOLA FL 32503

Title FINANCIAL SECRETARY
Name JOHNSON, GRACE
Address 2108 ROBINSON DR.
City-State-Zip: MOBILE AL 36605

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: LOLA R. PRESLEY

TREASURER

02/29/2024

Electronic Signature of Signing Officer/Director Detail

Date