

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000000378

Entity Name: NATIONAL URBAN LEAGUE, INC.**Current Principal Place of Business:**80 PINE STREET,
9TH FLOOR
NEW YORK, NY 10005**Current Mailing Address:**80 PINE STREET,
9TH FLOOR
NEW YORK, NY 10005 US**FEI Number:** 13-1840489**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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:** CARLOS M ALVAREZ, SPECIAL SECRETARY

03/10/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHRM, DIRECTOR
Name NEIDORFF, MICHAEL
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title VCHR, DIRECTOR
Name HERMAN, ALEXIS
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title TREASURER, DIRECTOR
Name CAMPBELL, JON
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title PD, CEO
Name MORIAL, MARC H
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title DIRECTOR
Name MURPHY, TIMOTHY
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

Title SECRETARY
Name LAKE, CHARLENE
Address 80 PINE STREET,
9TH FLOOR
City-State-Zip: NEW YORK NY 10005

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: CHARLENE LAKE**SECRETARY, BY LAUREN 03/10/2021
DUEMIG, ATTORNEY-IN-
FACT**

Electronic Signature of Signing Officer/Director Detail

Date

