

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44839

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: 100 BLACK MEN OF PENSACOLA, INC.

**Current Principal Place of Business:**

1019 W BELMONT ST  
PENSACOLA, FL 32501 US

**New Principal Place of Business:**

1220 PALISADES RD.  
PENSACOLA, FL 32504 US

**Current Mailing Address:**

P. O. BOX 18536  
PENSACOLA, FL 32523 US

**New Mailing Address:**

FEI Number: 59-3068740      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GANT, FREDERICK JEROME  
322 WEST CERVANTES STREET  
PENSACOLA, FL 32503 US

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

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

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: BYRD, WILLIAM E  
Address: 2550 N 15TH AVE  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: MCCORVEY, ELVIN  
Address: 1770 EAST BAARS STREET  
City-St-Zip: PENSACOLA, FL 32503

Title: PD (X) Delete  
Name: TICE, RALPH  
Address: 559 TALLOW TREE DR  
City-St-Zip: PENSACOLA, FL 32506 US

Title: TD ( ) Delete  
Name: HORTON, SAMUEL . A  
Address: 1020 PALISADE RFD  
City-St-Zip: PENSACOLA, FL 32504

Title: VP ( ) Delete  
Name: GANT, FREDERICK PARL.  
Address: 849 MAPLEWOOD CIR  
City-St-Zip: PENSACOLA, FL 32597

Title: H (X) Delete  
Name: MORRIS, JOSEPH MR  
Address: 2914 MULTON ROAD  
City-St-Zip: PENSACOLA, FL 32526

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: GANT, FREDERICK PARL.  
Address: 849 MAPLEWOOD CIR  
City-St-Zip: PENSACOLA, FL 32597

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SAMUEL A. HORTON

TD

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date