

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44839

Entity Name: 100 BLACK MEN OF PENSACOLA, INC.

Current Principal Place of Business:

1020 PALISADES RD.
PENSACOLA, FL 32504

Current Mailing Address:

P. O. BOX 18536
PENSACOLA, FL 32523 US

FEI Number: 59-3068740

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HORTON, SAMUEL A. III
1020 PALISADES RD
PENSACOLA, FL 32504-7923 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: SAMUEL A. HORTON

03/26/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name SEARCY, ARTHUR
Address 916 W. MICHIGAN AVE., SUITE E
City-State-Zip: PENSACOLA FL 32505

Title VD
Name DAGGS, LEON JR.
Address 830 WEEDEN ISLAND DRIVE
City-State-Zip: NICEVILLE FL 32578

Title PD
Name HORTON, SAMUEL A.
Address 1020 PALISADES RD
City-State-Zip: PENSACOLA FL 32504-7923

Title TD
Name NISBETT, MARK C
Address 7109 FITZPATRICK DRIVE
City-State-Zip: PENSACOLA FL 32526

Title D
Name RANDALL, NEAL JR.
Address 8445 TIPPIN AVE.
City-State-Zip: PENSACOLA FL 32514

Title SD
Name MCCORVEY, ERNEST
Address 740 SMILEY AVE.
City-State-Zip: PENSACOLA FL 32514

Title DIRECTOR
Name SMITH, JAMES E.
Address P.O. BOX 18536
City-State-Zip: PENSACOLA FL 32523-8536

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: SAMUEL A. HORTON

PRESIDENT

03/26/2015

Electronic Signature of Signing Officer/Director Detail

Date