## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45307

Entity Name: 100 BLACK MEN OF JACKSONVILLE, FLORIDA, INC.

FILED Feb 19, 2015 Secretary of State CC9920669740

Date

## **Current Principal Place of Business:**

1336 W. EDGEWOOD AVE. JACKSONVILLE. FL 32208

## **Current Mailing Address:**

POST OFFICE BOX 2065 JACKSONVILLE, FL 32203

FEI Number: 59-3190565 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

PINNIX, KENNETH M 1336 W. EDGEWOOD AVENUE JACKSONVILLE, FL 33208 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: KENNETH M. PINNIX 02/19/2015

Electronic Signature of Registered Agent

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 VP OF PROGRAMS

 Name
 GRIGGS, CHARLES
 Name
 DEVAUGHN, TILLIS

Address 1336 W. EDGEWOOD AVE. Address 1336 W. EDGEWOOD AVE. City-State-Zip: JACKSONVILLE FL 32208 City-State-Zip: JACKSONVILLE FL 32208

TitleVP OF DEVELOPMENTTitleVP OF OPERATIONSNamePINNIX, KENNETH MNameRAINES, THOMAS

Address 1336 W. EDGEWOOD AVE. Address 1336 WEST EDGEWOOD AVENUE

City-State-Zip: JACKSONVILLE FL 32208 City-State-Zip: JACKSONVILLE FL 32203

Title VP OF FINANCE Title SECRETARY

NameCUMMINS, ROBERT LNameKENNEDY, STEPHENAddress1336 W. EDGEWOOD AVE.Address1336 W. EDGEWOOD AVE.City-State-Zip:JACKSONVILLE FL 32208City-State-Zip:JACKSONVILLE FL 32208

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: ROBERT L CUMMINS VP OF FINANCE 02/19/2015