

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743170

FILED
May 04, 2007
Secretary of State

Entity Name: A BRIGHTER COMMUNITY, INC.

Current Principal Place of Business:

1613 N. MARION ST.
TAMPA, FL 336029638

New Principal Place of Business:

Current Mailing Address:

1613 N. MARION ST.
TAMPA, FL 336029638

New Mailing Address:

FEI Number: 59-0624453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RYALS, KAREN
2215 E HENRY AVENUE
TAMPA, FL 33610 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: PD () Delete
Name: FERRELL, TAMMY
Address: 425 N. FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33602

Title: VD () Delete
Name: MOON, AMY
Address: 3922 COCONUT PALM DRIVE STE 103
City-St-Zip: TAMPA, FL 33619

Title: TD () Delete
Name: DOUGLAS, STEPHEN
Address: 2203 N LOIS AVE STE 700
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: DOUGLAS, STEPHEN
Address: 2203 N LOIS AVE STE 700
City-St-Zip: TAMPA, FL 33602

Title: TD (X) Change () Addition
Name: HERRELL, MATTHEW
Address: 300S HYDE PARK AVE STE 210
City-St-Zip: TAMPA, FL 33606

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: TAMMY FERRELL

PD

05/04/2007

Electronic Signature of Signing Officer or Director

Date