## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000491

FILED Mar 24, 2009 Secretary of State

Entity Name: SOUTH FLORIDA COMMUNITY DEVELOPMENT COALITION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
181 N.E. 82ND STREET MIAMI, FL ;33138				300 NW 12TH AVE MIAMI, FL 331281019		
Current Mailing Address:			New Maili	New Mailing Address:		
181 N.E. 82ND STREET MIAMI, FL ;33138				300 NW 12TH AVE MIAMI, FL 331281019		
FEI Number:	45-0553449	FEI Number Applied For()	FEI Number Not App	Dicable ( ) Certificate of Status Desired (X)		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
STE 500 MIAMI, FL The above	AYNE BLVD. 33137 US	ubmits this statement for the pu	rpose of changing i	its registered office or registered agent, or both,		
SIGNATUF						
	Electroni	c Signature of Registered Agen	t	Date		
OFFICERS	S AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D () PATTERSON, DO P.O. BOX 01231 MIAMI, FL 3310	3	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition SHANK, ARDEN 300 NW 12TH AVE MIAMI, FL 331281019		
Title: Name: Address: City-St-Zip:	D () DILLER, SAM 181 NE 82ND ST MIAMI, FL 3313		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition GROSS, OLIVER 8500 NW 25TH AVE MIAMI, FL 33147		
Title: Name: Address: City-St-Zip:	D () SHANK, ARDEN 181 NE 82ND ST MIAMI, FL 3313	Г.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DILLER, SAM 181 NE 82ND ST MIAMI, FL 33138		
Title: Name: Address: City-St-Zip:	D () GROSS, OLIVER 8500 NW 25TH / MIAMI, FL 3314	AVE.	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition PATTERSON, DON 301 NW 9TH STREET MIAMI, FL 33136		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition MAYER, DOUG 2828 CORAL WAY, STE 500 MIAMI, FL 33145		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition ROMANI, BARBARA 8750 36TH ST, 7TH FLOOR MIAMI, FL 33178		

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: ARDEN SHANK O 03/24/2009