

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004631

FILED
Jul 01, 2005
Secretary of State

Entity Name: TYSON'S COMMUNITY DEVELOPMENT INC.

Current Principal Place of Business:

542-22ND ST
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

542-22ND ST
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 31-1486858 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:

TYSON, NORMA
3521 W 35TH ST
RIVERIA BEACH, FL 33404 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: P () Delete
Name: TYSON, MALISSA N
Address: 3521 W 35 ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: V () Delete
Name: BENTLEY, JUANITA
Address: 210 SHORE DR
City-St-Zip: RIVIERA BEACH, FL 33404

Title: S () Delete
Name: BUTLER, SANDRA
Address: 2026 PONCE DE LEON AVE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Delete
Name: GRAHAM, ATNEATAIES
Address: 542-22ND ST
City-St-Zip: WEST PALM BEACH, FL 33407

Title: T () Delete
Name: TYSON, SCOTT L
Address: 3521 W 35TH STREET
City-St-Zip: RB, FL 33404

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MALISSA N. TRYSON

PRES

07/01/2005

Electronic Signature of Signing Officer or Director

_____ Date