

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2006 8:00 am
Secretary of State

07-06-2006 90002 047 ****70.00

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1. Entity Name
GREATER FRIENDSHIP COMMUNITY DEVELOPMENT, INC.

Principal Place of Business
**539 GEORGE W. ENGRAM BOULEVARD
 DAYTONA BEACH, FL 32114**

Mailing Address
**539 GEORGE W. ENGRAM BOULEVARD
 DAYTONA BEACH, FL 32114**

50021554



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07032006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
59-2769695

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DURHAM, L. RONALD DR.
 539 GEORGE W. ENGRAM BOULEVARD
 DAYTONA BEACH, FL 32114**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
 Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** Delete
 NAME **DURHAM, L. RONALD DR.**
 STREET ADDRESS **110 ALEATHA DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** Delete
 NAME **SMITH, JAMES**
 STREET ADDRESS **1333 GINSBERG DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32117**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** Delete
 NAME **CLAYTON, BOBBY**
 STREET ADDRESS **133 ALEATHA DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** Delete
 NAME **SCARLETT, CARLTON**
 STREET ADDRESS **318 JEFFERSON STREET**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **GIBSON, RONALD**
 STREET ADDRESS **112 DIANNA DRIVE**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32114**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BATES, BETTYE**
 STREET ADDRESS **1071 N. GERTRUDE COURT**
 CITY-ST-ZIP **DAYTONA BEACH, FL 32117**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dr. L. Ronald Durham (Dr. L. Ronald Durham)
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/06
 Date

386-252-0322
 Daytime Phone #