

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000624

FILED
May 02, 2008
Secretary of State

Entity Name: 11TH DISTRICT AFRICAN METHODIST EPISCOPAL COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

101 EAST UNION STREET
SUITE 300
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

101 EAST UNION STREET
SUITE 300
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

Name and Address of New Registered Agent:

YOUNG, MCKINLEY BISHOP
101 EAST UNION STREET
SUITE 300
JACKSONVILLE, FL 32202 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: YOUNG, MCKINLEY BISHOP
Address: 101 E UNION STREET, STE 300
City-St-Zip: JACKSONVILLE, FL 32202

Title: VPD () Delete
Name: KEEL, JIMMY
Address: 6705 N 32ND STREET
City-St-Zip: TAMPA, FL 33610

Title: D () Delete
Name: WILLIAMS, CLARENCE
Address: 9110 HIDDEN WATER CIRCLE
City-St-Zip: RIVERVIEW, FL 33569

Title: TD () Delete
Name: EWING, PEARCE
Address: 6948 MONTREAL DRIVE
City-St-Zip: LAKE LAND, FL 33810

Title: D () Delete
Name: ROJAS, MAZIE
Address: 5701 BENTGRASS DRIVE, #212
City-St-Zip: SARASOTA, FL 34235

Title: D () Delete
Name: COOK, WILLIE
Address: 15277 NE FIRST STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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:

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

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: MCKINLEY YOUNG

PD

05/02/2008

Electronic Signature of Signing Officer or Director

Date