

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000001744

**FILED**  
**Mar 22, 2018**  
**Secretary of State**  
**CC1717214138**

**Entity Name:** SHOWERS OF BLESSINGS COMMUNITY DEVELOPMENT CENTER, INC.

**Current Principal Place of Business:**

1431 RADLEIGH PLACE  
ORLANDO, FL 32808

**Current Mailing Address:**

1431 RADLEIGH PLACE  
ORLANDO, FL 32808

**FEI Number: 46-2127257**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SPPED, MESSO  
1431 RADLEIGH PLACE  
ORLANDO, FL 32808 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

**Officer/Director Detail :**

Title D/P  
Name SPEED, MESSO  
Address 1431 RADLEIGH PLACE  
City-State-Zip: ORLANDO FL 32808

Title D/VP  
Name SPEED, LEON  
Address 1431 RADLEIGH PLACE  
City-State-Zip: ORLANDO FL 32808

Title D/T  
Name COOPER, EVELYN  
Address 5493 TIMBERLEAF BLVD  
APT 1407  
City-State-Zip: ORLANDO FL 32811

Title D/S  
Name WHITE, PRECIOUS  
Address 3614 RODRICK CIRCLE  
City-State-Zip: ORLANDO FL 32824

Title D  
Name LYLES-JOHNSON, SHARON  
Address 399 RAILROAD AVENUE  
City-State-Zip: WINTER GARDEN FL 34787

*I hereby 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 all other like empowered.*

**SIGNATURE: MESSO SPEED**

**PRESIDENT**

**03/22/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date