

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000035322

**Entity Name:** NORTH EAST WEST SOUTH COMMUNITY INVESTMENT GROUP, INC.

**FILED**  
**Feb 26, 2014**  
**Secretary of State**  
**CC7554619068**

**Current Principal Place of Business:**

4931 COQUINA CROSSING DR  
ELKTON, FL 32033

**Current Mailing Address:**

4931 COQUINA CROSSING DR  
ELKTON, FL 32033 US

**FEI Number: 75-3147011**

**Certificate of Status Desired: No**

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

HOGAN, BOBBY J  
4931 COQUINA CROSSING DR  
ELKTON, FL 32033 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 P  
Name ELLIS, CHARLES E  
Address 725 WILLOWWOOD PL  
City-State-Zip: SAINT AUGUSTINE FL 32086

Title D  
Name WILSON, ANTONIO M  
Address 2212 THERRELL WAY  
City-State-Zip: MCKINNEY TX 75070

Title D  
Name SCOTT, BERNARD  
Address 1018 MOHICAN TRAIL  
City-State-Zip: TALLAHASSE FL 32317

Title T  
Name HOGAN, BOBBY J  
Address 4931 COQUINA CROSSING DR  
City-State-Zip: ELKTON FL 32033

Title S  
Name BULLOCK, WILLIAM T  
Address 7 SAWMILL COURT  
City-State-Zip: PALM COAST FL 32164

*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 607, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BOBBY HOGAN**

**TREASURER**

**02/26/2014**

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

\_\_\_\_\_  
Date