

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # 734888

1. Entity Name
ROBERTSVILLE-ST. JOHN COMMUNITY DEVELOPMENT
ASSOCIATION, INC.



Principal Place of Business
196 DAVID THOMAS LANE
QUINCY, FL 32351

Mailing Address
196 DAVID THOMAS LANE
QUINCY, FL 32351



03172006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2931967	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS, EUGENE
698 MT HOSEY ROAD
QUINCY, FL 32351

**DO NOT WRITE
IN THIS SPACE**

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 re-registering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHAW, DOROTHY
STREET ADDRESS	4010 BAINBRIDGE HWY
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	PD
NAME	THOMAS, EUGENE
STREET ADDRESS	698 MT HOSEY CHURCH ROAD
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	S
NAME	KENON, MARY
STREET ADDRESS	196 DAVID THOMAS LANE
CITY-ST-ZIP	QUINCY, FL 32351
TITLE	VPD
NAME	MARSHALL, LEROY
STREET ADDRESS	605 MT HOSEY CHURCH RD
CITY-ST-ZIP	QUINCY, FL 32352
TITLE	FS
NAME	RAY, ALPHONSO
STREET ADDRESS	455 GOLDWIRE ROAD
CITY-ST-ZIP	QUINCY, FL 32352
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000532129
05/06/06-80073-010 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

Eugene Thomas Eugene Thomas 23-06 427-3222
850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #