


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90314 019 ****61.25

DOCUMENT # 749028

1. Entity Name
CERNY HOUSING DEVELOPMENT CORPORATION, INC.



Principal Place of Business
**1920 W. GARDEN ST.
 P O BOX 18370
 PENSACOLA, FL 32523**

Mailing Address
**1920 W. GARDEN ST.
 P O BOX 18370
 PENSACOLA, FL 32523**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

01062006 Chg-NP CR2E037 (11/05)



4. FEI Number
59-6001285

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**ROGERS, JOSEPH M.
 1920 W. GARDEN ST.
 PENSACOLA, FL 32501**

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

Filing Fee is **\$61.25** Due by **May 1, 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 NAME STREET ADDRESS CITY-ST-ZIP	STD ROGERS, JOSEPH M 1920 W GARDEN ST PENSACOLA, FL 32501 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIMS, PHYLLIS <input checked="" type="checkbox"/> Delete 1920 W GARDEN STREET PENSACOLA, FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Henderson, Shirley 1920 W. Garden St. PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NICHALS, MELANIE <input type="checkbox"/> Delete 1920 W GARDEN STREET PENSACOLA, FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Nichols
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YOUNG, MARIE <input type="checkbox"/> Delete 1920 W GARDEN ST PENSACOLA, FL 32501	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V-PD Curry, Dolores 1920 W. Garden St. PENSACOLA, FL 32501
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Givens, Gwendolyn 1920 W. Garden St. PENSACOLA, FL 32501

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: Joseph M. Rogers **Joseph M. Rogers** 01/06/06 850-438-8561
Signature and typed or printed name of signing officer or director Date Daytime Phone #