

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757432

FILED
Feb 19, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA COMMUNITY ACTION AGENCY, INC.

Current Principal Place of Business:

2606 NW 6TH ST.
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

PO BOX 1503
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 59-2113799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, CHARLES J JR.
2704 NW 46TH PL
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

NIMMO, BRAD
926 NW 27TH AVE.
OCALA, FL 34475 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: BRAD NIMMO

02/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TRES () Delete
Name: WARMACK, FREDDIE L.,
Address: 260 NW 253 STREET
City-St-Zip: NEWBERRY, FL 32669

Title: SD () Delete
Name: SMITH, LENA R
Address: 1102 NW 14TH AVE
City-St-Zip: OCALA, FL 34475

Title: VPD () Delete
Name: NIMMO, BRAD
Address: (26 NW 27TH AVE.
City-St-Zip: OCALA, FL 34475

Title: ED () Delete
Name: WILFORD, ROBERT W
Address: 5400 NW 39TH AVE. C-16
City-St-Zip: GAINESVILLE, FL 32606

Title: PRES () Delete
Name: HARRIS, CHARLES J JR
Address: 2704 NW 46TH PL
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change () Addition
Name: VIAGGIO, MYLONIA,
Address: 212 NORTH MAIN ST.
City-St-Zip: CHIEFLAND, FL 32626

Title: VPD (X) Change () Addition
Name: SMITH, LENA R
Address: 1102 NW 14TH AVE
City-St-Zip: OCALA, FL 34475

Title: PRES (X) Change () Addition
Name: NIMMO, BRAD
Address: (26 NW 27TH AVE.
City-St-Zip: OCALA, FL 34475

Title: CEO (X) Change () Addition
Name: WILFORD, ROBERT W
Address: 5400 NW 39TH AVE. C-16
City-St-Zip: GAINESVILLE, FL 32606

Title: TRES (X) Change () Addition
Name: HARRIS, CHARLES J JR
Address: 2704 NW 46TH PL
City-St-Zip: GAINESVILLE, FL 32605

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: BRAD NIMMO

PRES

02/19/2009

Electronic Signature of Signing Officer or Director

Date