

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764585

FILED
Apr 21, 2006
Secretary of State

Entity Name: THE COMMUNITY OF EL-EASTMOOR, INC.

Current Principal Place of Business:

480 N.W. 89TH STREET
EL PORTAL, FL 33150

New Principal Place of Business:

Current Mailing Address:

480 N.W. 89TH STREET
EL PORTAL, FL 33150

New Mailing Address:

FEI Number: 59-2222312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLAH-EL, YONAS
480 N.W. 89TH STREET
EL PORTAL, FL 33150 US

Name and Address of New Registered Agent:

ALLAH-EL, YONAS RA
480 N.W. 89TH STREET
EL PORTAL, FL 33150 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: YONAS ALLAH-EL

04/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ALLAH-EL, YONAS,
Address: 480 N.W. 89 ST.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: JENKINS, MARCHAHL A, .
Address: 4101 S.W. 27TH STREET
City-St-Zip: BROWARD, FL

Title: D () Delete
Name: BRICE, LORENZO,
Address: 608 SW 12TH AVE.
City-St-Zip: DANIA, FL

Title: D () Delete
Name: FLORENCE, JIMMY
Address: 480 N.W. 89 ST.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: YONAS ALLAH-EL

DP

04/21/2006

Electronic Signature of Signing Officer or Director

Date