

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 08:00 A
Secretary of State

DOCUMENT # F04000001592

1. Entity Name
CDT I, INC.



Principal Place of Business

1350 BROADWAY, SUITE 700
C/O THE COMMUNITY DEVELOPMENT TRUST, INC.
NEW YORK, NY 10018

Mailing Address

1350 BROADWAY, SUITE 700
C/O THE COMMUNITY DEVELOPMENT TRUST, INC.
NEW YORK, NY 10018



05012007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4078831

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LEVY, JUDD S
STREET ADDRESS 1350 BROADWAY, SUITE 700
CITY-ST-ZIP NEW YORK, NY 10018

TITLE DT
NAME DIVERS, JOHN
STREET ADDRESS 1350 BROADWAY, SUITE 700
CITY-ST-ZIP NEW YORK, NY 10018

TITLE DS
NAME ROBBINS, SUSAN T
STREET ADDRESS 1350 BROADWAY, SUITE 700
CITY-ST-ZIP NEW YORK, NY 10018

TITLE V
NAME HORVATH, WARREN F
STREET ADDRESS 1350 BROADWAY, SUITE 700
CITY-ST-ZIP NEW YORK, NY 10018

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000760969
05/25/07-80035-021 150.00

**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 607, 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:

JOHN J DIVERS *John J Divers*

4/30/07

Date

712-571-5080

Daytime Phone #