SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

APPROVED AND FILED
1997 NOV -7 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H96214 (2)

1. Corporation Name
COMMUNITY PRIDE, INC.

Principal Place of Business
% LEROY D. DENNIS
1001 GRAND AVENUE
ORLANDO FL 32805-4527

Mailing Address
% LEROY D. DENNIS
1001 GRAND AVENUE
ORLANDO FL 32805-4527

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/27/1986
3a. Date of Last Report: 10/09/1996
4. FEI Number: 59-2746833 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
DENNIS, LEROY D
1001 GRAND AVENUE
ORLANDO FL 32801

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE [signature] — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	S — ☐ Change ☒ Addition
NAME	DENNIS, LEROY D		1.2 NAME	Sylvia Scott
STREET ADDRESS	1001 GRAND AVENUE		1.3 STREET ADDRESS	1001 Grand Ave
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	orlando, Fl.
TITLE	D	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	GRAY, TALBERT		2.2 NAME	
STREET ADDRESS	865 WESSON DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	CASSELBERRY FL		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	MAXWELL, FRED		3.2 NAME	
STREET ADDRESS	2035 W. CENTRAL BLVD.		3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	4.1 TITLE	☐ Addition
NAME	JACK, MARY		4.2 NAME	REINSTATEMENT
STREET ADDRESS	3300 GULFSTREAM RD.		4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL		4.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	ROBERTS, BELVIN		5.2 NAME	
STREET ADDRESS	2940 CLEARWAY		5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL		5.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	ROBINSON, JEFF		6.2 NAME	
STREET ADDRESS	5020 W. SOUTH STREET		6.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL		6.4 CITY-ST-ZIP	

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****750.00 ****750.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Leroy Dennis

CR2E034 (4/97)