

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L66074

FILED
Jan 29, 2009
Secretary of State

Entity Name: COMMUNITY REDEVELOPMENT ASSOCIATES OF FLORIDA, INC.

Current Principal Place of Business:

8569 PINES BLVD.
#201
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

8569 PINES BLVD.
#201
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 65-0216617 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LARSEN, MARTIN R
8569 PINES BLVD.
SUITE 201
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPD () Delete
Name: LARSEN, MARTIN R
Address: 304 SW 85 TERRACE #310
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VD () Delete
Name: AZEBEOKHAI, ANDREW
Address: 7630 NW 11 PLACE
City-St-Zip: PLANTATION, FL 33322

Title: VSTD () Delete
Name: JOHNSON, EARLY,
Address: 4429 NW 41 ST. PLACE
City-St-Zip: COCONUT CREEK, FL 33073

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN LARSEN

Electronic Signature of Signing Officer or Director

PRES

01/29/2009

Date