

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004279

FILED  
Apr 23, 2007  
Secretary of State

Entity Name: NEW GROWTH COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

1170 COURT STREET  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

1170 COURT STREET  
CLEARWATER, FL 33756

**New Mailing Address:**

FEI Number: 59-3654161      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PEARSON, NORMAN  
1170 COURT STREET  
CLEARWATER, FL 33756      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

**OFFICERS AND DIRECTORS:**

Title: CD      ( ) Delete  
Name: BROTHERS, NORRIS  
Address: 221 - 37TH STREET  
City-St-Zip: ST. PETERSBURG, FL 33711

Title: PD      ( ) Delete  
Name: PEARSON, NORMAN  
Address: 262 HEMINGWAY DR  
City-St-Zip: OLDSMAR, FL 34677

Title: VCD      ( ) Delete  
Name: DON, PERKINS  
Address: 3617 MERIDEN AVE  
City-St-Zip: OLDSMAR, FL 34677

Title: SD      ( ) Delete  
Name: ZORAIDA, FLORES  
Address: 110 GRAPFRUIT DR.  
City-St-Zip: CLEARWATER, FL 33759

Title: D      ( ) Delete  
Name: ARTHUR, SMITH  
Address: 6850 7TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33711

Title: TD      ( ) Delete  
Name: TORRES, JOSA  
Address: 9325 MANSATD LANE  
City-St-Zip: PORT RICHEY, FL 34668

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VCD      (X) Change ( ) Addition  
Name: RIVAS, RAFAEL  
Address: 3445 GARDENIA PL. APT#205  
City-St-Zip: LARGO, FL 33771

Title: SD      (X) Change ( ) Addition  
Name: WEEKS, NORMA B  
Address: 107 JASMINE CIR.  
City-St-Zip: SAFETY HARBOR, FL 34695

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: NORMAN PEARSON

PD

04/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date