2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004
Secretary of State

DOCUMENT# N00000005829

Entity Name: TEKOAH COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

12587 N.W. 7 AVENUE
NORTH MIAMI, FL 33168

New Principal Place of Business:

99 N.W. 183 ST.
SUITE 122
MIAMI, FL 33169

Current Mailing Address:

12587 N.W. 7 AVENUE
NORTH MIAMI, FL 33168

New Mailing Address:

99 N.W. 183 ST.
SUITE 122
MIAMI, FL 33169

FEI Number: 65-1037328 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FORRESTER, DON
12587 N.W. 7 AVENUE
NORTH MIAMI, FL 33168 US

Name and Address of New Registered Agent:

FORRESTER, DON
99 NW 183 ST.
122
MIAMI, FL 33169 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: _____ 03/19/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TRU ( ) Delete
Name: FORRESTER, DON
Address: 12587 N.W. 7 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: CEO ( ) Delete
Name: FORRESTER, DON
Address: 12587 N.W. 7 AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

Title: TRU ( ) Delete
Name: FORRESTER, MAGDALENE
Address: 12587 NW 7 AVE
City-St-Zip: NORTH MIAMI, FL 33168 US

Title: TRU ( ) Delete
Name: TURNER, DESMOND
Address: 12587 NW 7 AVE
City-St-Zip: NORTH MIAMI, FL 33168 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: FORRESTER, MAGDALENE
Address: 99 N.W 183 ST
City-St-Zip: MIAMI, FL 33169

Title: TRU (X) Change ( ) Addition
Name: FORRESTER, DON
Address: 99 NW 183 ST
City-St-Zip: MIAMI, FL 33169

Title: TRU (X) Change ( ) Addition
Name: FORRESTER, MAGDALENE
Address: 99 NW 183 ST
City-St-Zip: MIAMI, FL 33169 US

Title: TRU (X) Change ( ) Addition
Name: PRESLEY, JANINE
Address: 99 NW 183 ST
City-St-Zip: MIAMI, FL 33169 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DON FORRESTER TRU 03/19/2004
Electronic Signature of Signing Officer or Director — Date