2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2006
Secretary of State

DOCUMENT# N00000007932

Entity Name: FRENCHTOWN COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

421 WEST GEORGIA
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

421 WEST GEORGIA
TALLAHASSEE, FL 32301

New Mailing Address:

P O BOX 10388
TALLAHASSEE, FL 32302

FEI Number: 59-3686332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, REGINA M
421 WEST GEORGIA STREET
TALLAHASSEE, FL 32301 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:	TSD	( ) Delete
Name:	MAJEED, NA'IM	
Address:	907 DENT STREET	
City-St-Zip:	TALLAHASSEE, FL 32302	
Title:	PD	( ) Delete
Name:	AKBAR, NA'IM	
Address:	324 NORTH COPELAND STREET	
City-St-Zip:	TALLAHASSEE, FL	
Title:	VPD	( ) Delete
Name:	TELFAIR, EUGENE	
Address:	846 W. BREVARD STREET	
City-St-Zip:	TALLAHASSEE, FL 32302	
Title:	M	(X) Delete
Name:	HARRIS, ANNIE	
Address:	438 WEST GEORGIA STREET	
City-St-Zip:	TALLAHASSEE, FL 32302	
Title:	M	(X) Delete
Name:	CRAWFORD-HENDERSON, GLORIA	
Address:	4052 KILMARTIN DRIVE	
City-St-Zip:	TALLAHASSEE, FL 32308	

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:	
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: REGINA DAVIS RA 08/30/2006

Electronic Signature of Signing Officer or Director — Date