

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008086

FILED
Apr 21, 2005
Secretary of State

Entity Name: OPA-LOCKA/NORTH DADE FRONT PORCH COUNCIL, INC.

Current Principal Place of Business:

PO BOX 541575
OPA-LOCKA, FL 33054

New Principal Place of Business:

200 OPA - LOCKA BLVD.
ATTN: ULYSSES HARVARD
OPA-LOCKA, FL 33054

Current Mailing Address:

PO BOX 541575
OPA-LOCKA, FL 33054

New Mailing Address:

200 OPA LOCKA BLVD.
ATTN: ULYSSES HARVARD
OPA-LOCKA, FL 33054

FEI Number: 65-1098113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MINCEY, JUANITA
2527 OPA-LOCKA BLVD.
OPA-LOCKA, FL 33054 US

Name and Address of New Registered Agent:

JOHNSON, PRISCILLA D
2950 N.W. 164TH TERRACE
OPA-LOCKA, FL 33054 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: PRISCILLA D. JOHNSON

04/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HARVARD, ULYSSES
Address: 15800 NW 17TH PLACE
City-St-Zip: MIAMI, FL 33054

Title: SD () Delete
Name: ALICIA BROWN, MARY
Address: 2444 N.W. 135TH STREET
City-St-Zip: MIAMI, FL 33167

Title: TD () Delete
Name: MOSLEY, ARTIS
Address: 2420 N.W. 161ST STREET
City-St-Zip: OPA-LOCKA, FL 33054

Title: SD () Delete
Name: RUSSELL, JANNIE L
Address: 1210 PERI STREET
City-St-Zip: OPA-LOCKA, FL 33054

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:

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: PRISCILLA D. JOHNSON

RA

04/21/2005

Electronic Signature of Signing Officer or Director

Date