2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000088

FILED Mar 10, 2008 Secretary of State

Entity Name: COMMUNITY RESOURCE EDUCATION DEVELOPMENT INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

2049 NORTH PEARL STREET

JACKSONVILLE, FL 32206 US

600 EAVERSON STREET

JACKSONVILLE, FL 32204 US

Current Mailing Address: New Mailing Address:

2049 NORTH PEARL STREET

JACKSONVILLE, FL 32206 US

2783 ARMSDALE ROAD

JACKSONVILLE, FL 32218 US

FEI Number: 59-3694396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CREDI, INC
CREDI, ENC

2049 NORTH PEARL STREET

JACKSONVILLE, FL 32206 US

600 EAVERSON STREET

JACKSONVILLE, FL 32204 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: REGINALD L. GUNDY 03/10/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DS (X) Change () Addition Name: GORDON, JAMES Name: GORDON, JAMES

Address: 2036 SILVER STREET Address: GORDON, JAMES

City-St-Zip: JACKSONVILLE, FL 32206 US City-St-Zip: JACKSONVILLE, FL 32204 US

Title: DS () Delete Title: DS (X) Change () Addition

Name: WILLIAMS, LENNY Name: MARK, LEVY

Address: 2049 N PEARL STREET Address: 600 EAVERSON STREET
City-St-Zip: JACKSONVILLE, FL 32206 US City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D (X) Delete Title: () Change () Addition

 Name:
 MARSHALL, RALPH
 Name:

 Address:
 2049 N PEARL STREET
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32206 US
 City-St-Zip:

Name:KORNEGAY, TANYAName:KORNEGAY, TANYAAddress:2049 N PEARL STREETAddress:600 EAVERSON STREETCity-St-Zip:JACKSONVILLE, FL 32206 USCity-St-Zip:JACKSONVILLE, FL 32204 US

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

SIGNATURE: REGINALD L. GUNDY CEO 03/10/2008

Electronic Signature of Signing Officer or Director

Date