2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2009
Secretary of State

DOCUMENT# N01000000823

Entity Name: METRO NORTH COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

3105 N MAIN ST
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

3105 N MAIN ST
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 31-1761439 **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:

STATON, BRENT A
3732 NORTH MAIN STREET
JACKSONVILLE, FL 32206 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: BPD ( ) Delete
Name: STATON, BRENT A
Address: 3732 NORTH MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: BTD ( ) Delete
Name: GREEN, JAMES
Address: 465 WEST 71ST STREET
City-St-Zip: JACKSONVILLE, FL 32208

Title: VPD ( ) Delete
Name: WALKER, JOANN
Address: 4563 NORTH PEARL STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: BSD ( ) Delete
Name: THOMAS, DESHANNA
Address: 5328 DOSTIE DR S
City-St-Zip: JACKSONVILLE, FL 32209

Title: BMD ( ) Delete
Name: CORWIN, ANDREW
Address: 1601 N MAIN STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: BMD ( ) Delete
Name: BARTLEY, JAMES
Address: 520 WEST 23RD STREET
City-St-Zip: JACKSONVILLE, FL 32206

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: BMD (X) Change ( ) Addition
Name: MICHAEL, SWAIN
Address: 455 W 71TH STREET
City-St-Zip: JACKSONVILLE, FL 32208

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 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: BRENT A. STATON BPD 05/14/2009

Electronic Signature of Signing Officer or Director — Date