

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000000823

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**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:**

3105 NORTH MAIN STREET  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

3105 N MAIN ST  
JACKSONVILLE, FL 32206

**New Mailing Address:**

3105 NORTH MAIN STREET  
JACKSONVILLE, FL 32206

**FEI Number:** 31-1761439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**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:**

FULLWOOD, REGGIE  
3105 NORTH MAIN STREET  
JACKSONVILLE, FL 32206 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: REGGIE FULLWOOD

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: BPD  
Name: SWAIN, MICHAEL  
Address: 455 W 71TH STREET  
City-St-Zip: JACKSONVILLE, FL 32208

Title: BTD  
Name: JEROME, CRAWFORD  
Address: 3105 NORTH MAIN STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VCD  
Name: TURNER, ALAN  
Address: 8008 LOAIN STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: BMD  
Name: STATON, BRENT A  
Address: 3732 NORTH MAIN STREET  
City-St-Zip: JACKSONVILLE, FL 32208

Title: BMD  
Name: CORWIN, ANDREW  
Address: 1601 NORTH MAIN STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: BMD  
Name: SMITH, MITCHELL  
Address: 455 W 71ST STREET  
City-St-Zip: JACKSONVILLE, FL 32208

I hereby 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 all other like empowered.

SIGNATURE: REGGIE FULLWOOD

ED

04/29/2011

Electronic Signature of Signing Officer or Director

Date