

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002056

FILED
Apr 26, 2005
Secretary of State

Entity Name: CORDIE TOOKES GROUP HOME, INC.

Current Principal Place of Business:

3745 NW 171 TERR
OPA LOCKA, FL 33055

New Principal Place of Business:

Current Mailing Address:

3745 NW 171 TERR
OPA LOCKA, FL 33055

New Mailing Address:

FEI Number: 01-0733771

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOOKES, CORDIE
3745 NW 171 TERR
OPA LOCKA, FL 33055 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: P D () Delete
Name: TOOKES, CORDIE
Address: 3745 NW 171 TERR
City-St-Zip: OPA LOCKA, FL 33055

Title: VD () Delete
Name: MACON, LEE A
Address: 3686 NW 28 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: TD () Delete
Name: MOORE, JOANN
Address: 13500 NE 3 COURT
City-St-Zip: N MIAMI, FL 33161

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:

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: LEE A MACON

VD

04/26/2005

Electronic Signature of Signing Officer or Director

Date