## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000002994

FILED Sep 03, 2008 Secretary of State

Entity Name: THE NEHEMIAH PROJECT COMMUNITY DEVELOPMENT CORPORATION

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

3108 MERLOT WAY 3724 WADE ROAD CLERMONT, FL 34711 ORLANDO, FL 32808

Current Mailing Address: New Mailing Address:

3108 MERLOT WAY 3724 WADE ROAD CLERMONT, FL 34711 ORLANDO, FL 32808

FEI Number: 59-3730892 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: Name and Address of New Registered Agent:

ADKINS, WILLE R

3108 MERLOT WAY

CLERMONT, FL 34711 US

DOCUMENTS CENTER INC.
7014 NORTH WEST 79TH AVE.
TAMARAC,, FL 33321 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: BETTY J. GILMORE 09/03/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ADKINS, WILLIE R
 Name:
 ADKINS, WILLIE R

 Address:
 3108 MERLOT WAY
 Address:
 3108 MERLOT WAY

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

 Name:
 SMITH, ERICA
 Name:
 SMITH, ERICA

 Address:
 3108 MERLOT WAY
 Address:
 3108 MERLOT WAY

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 CLERMONT, FL 34711

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

 Name:
 MCCOY, LAVERNE
 Name:
 ADKINS, DARRELL

 Address:
 3108 MERLOT WAY
 Address:
 3724 WADE ROAD

 City-St-Zip:
 CLERMONT, FL 34711
 City-St-Zip:
 ORLANDO, FL 32808

 $\label{eq:title:Title:S} \textit{Title:} S \qquad \textit{( ) Change (X) Addition}$ 

 Name:
 Name:
 ADKINS, CARMEN

 Address:
 Address:
 3724 WADE ROAD

 City-St-Zip:
 City-St-Zip:
 ORLANDO, FL 32808

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: BETTY J. GILMORE RA 09/03/2008