

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N01000005991**

1. Entity Name  
**WILLIE R. SINGLETON COMMUNITY DEVELOPMENT  
MINISTRIES, INC.**



Principal Place of Business  
**1015 NW 4TH ST.  
BOYNTON BCH, FL 33435**

Mailing Address  
**1572 W. 36TH ST.  
RIVIERA BCH, FL 33404**



02072008 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**50-0003908**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**SINGLETON, WILLIE R  
1572 W 36TH STREET  
RIVIERA BEACH, FL 33404**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

000000022087  
02/19/08-80053-005 61.25

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME SINGLETON, WILLIE R  
STREET ADDRESS 1572 W. 36TH STREET  
CITY-ST-ZIP RIVIERA BCH, FL 33404

TITLE VD  
NAME SINGLETON, ELLA MAE  
STREET ADDRESS 1572 W. 36TH STREET  
CITY-ST-ZIP RIVIERA BCH, FL 33404

TITLE SD  
NAME SINGLETON-SPENCE, SHARON  
STREET ADDRESS 104 CHAMPION RUN  
CITY-ST-ZIP W. PALM BCH, FL 33407

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Willie R. Singleton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/08/08 (SL) 848-0737

Date

Daytime Phone #