## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000000918

FILED Jan 27, 2009 Secretary of State

Entity Name: PRIDE COMMUNITY CENTER OF NORTH CENTRAL FLORIDA INC.

Current Principal Place of Business:			New P	New Principal Place of Business:		
3131 NW 1	3TH ST					
STE 61	.LE, FL 32609					
			Now M	ailing Addrage.		
Current wa	ailing Addres	<b>&gt;.</b>	Mew M	ailing Address:		
	ICE BOX 5383 .LE, FL 32627					
FEI Number:	59-3690357	FEI Number Applied For ( )	FEI Number Not	Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name a	and Address of Ne	w Registered Agent:	
306 NE 7TH	TERENCE P H STREET LLE, FL 32601	US				
The above in the State		submits this statement for the pu	ırpose of changi	ng its registered offi	ice or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	ic Signature of Registered Ager	nt		Date	
OFFICERS AND DIRECTORS:			ADDIT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () FLEMING, TERE 306 NE 7TH ST GAINESVILLE, F		Title: Name: Address: City-St-Z		Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) FOX, STACI 5703 SW 10TH GAINESVILLE, F		Title: Name: Address: City-St-Z	.,	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D (X) KARP, ROBERT 1101 NW 43RD GAINESVILLE, F	AVE	Title: Name: Address: City-St-Z		Change ()Addition	
Title: Name: Address: City-St-Zip:	D () WESTER, JENN PO BOX 141511 GAINESVILLE, F	1	Title: Name: Address: City-St-Z		Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () HENJUM, ELAIN 10254 SW 55TH GAINESVILLE, F	l LN	Title: Name: Address: City-St-Z	MILLER, TRACY 916 NE 19TH PL	Change ( ) Addition	

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: TERENCE FLEMING PD 01/27/2009