

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000929

FILED
Apr 30, 2008
Secretary of State

Entity Name: BENJAMIN J. BAKER COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

318 E. CHARLOTTE AVENUE
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

PO BOX 511713
PUNTA GORDA, FL 339511713

New Mailing Address:

PO BOX 511713
PUNTA GORDA, FL 339511713 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HADDOCK, ELLISON
28200 BERMONT ROAD
APT 12C
PUNTA GORDA, FL 33982 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: PD () Delete
Name: HADDOCK, ELLISON
Address: 28200 BERMONT ROAD, APT 12C
City-St-Zip: PUNTA GORDA, FL 33982

Title: SD () Delete
Name: HAYNES, BOOKER T JR
Address: 512 E. HELEN AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD () Delete
Name: JONES, WILLIAM H SR
Address: 318 E. CHARLOTTE AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: VD () Delete
Name: MARION, WALTER
Address: 427 SHOWALTER AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: B (X) Delete
Name: GRIFFITHS, DANIELLE M
Address: 2226 LAKESHORE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: HAYNES, BOOKER T JR
Address: 512 E. HELEN AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD (X) Change () Addition
Name: WILLIAMS, EDRIS S
Address: 3233 WOODTHRUSH ST, APT 12-C
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD (X) Change () Addition
Name: GRIFFITHS, DANIELLE M
Address: 2226 LAKESHORE CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DANIELLE GRIFFITHS

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date