

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003297

FILED
May 15, 2006
Secretary of State

Entity Name: COMMUNITY INFORMATION NETWORK, INC.

Current Principal Place of Business:

402 W. CERVANTES STREET
PENSACOLA, FL 32501 US

New Principal Place of Business:

14 WEST JORDAN STREET
1D
PENSACOLA, FL 32501 US

Current Mailing Address:

402 W. CERVANTES STREET
PENSACOLA, FL 32501

New Mailing Address:

14 WEST JORDAN STREET
1D
PENSACOLA, FL 32501

FEI Number: 03-0384180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MCKENZIE, GERALD
301 N. BARCELONA STREET
PENSACOLA, FL 32501 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: MRS () Delete
Name: KELLY, CATHERINE B PRESIDE
Address: 4335 BRIDGEDALE ROAD
City-St-Zip: PENSACOLA, FL 32505 US

Title: MRS () Delete
Name: SALTER, ROSE SECRETA
Address: 202 E. YONGE ST.
City-St-Zip: PENSACOLA, FL 32503 US

Title: MRS () Delete
Name: BLACKMON, JEAN SECRETA
Address: 7405 VIVER NELL LANE
City-St-Zip: PENSACOLA, FL 32526 US

Title: MR. () Delete
Name: ROBERSON, DANIEL V. PRESI
Address: 6320 W. LARAU STREET
City-St-Zip: PENSACOLA, FL 32501 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: ROBERSON, DANIEL PRESIDE
Address: 6320 W. LARAU STREET
City-St-Zip: PENSACOLA, FL 32501 US

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

Title: MR (X) Change () Addition
Name: DAVIS, MARCEL C TREASUR
Address: 4093 COBIA STREET
City-St-Zip: PENSACOLA, FL 32507 US

Title: MRS (X) Change () Addition
Name: BOLLER, JOANNE MEMBER
Address: 6285 SAN MONICA ROAD
City-St-Zip: PENSACOLA, FL 32504 US

I hereby certify that the information supplied with this filing does not qualify for the 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: OWEN NEIL

ED

05/15/2006

Electronic Signature of Signing Officer or Director

Date