

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004112

FILED
May 27, 2008
Secretary of State

Entity Name: THE CITY OF TRUTH, INC.

Current Principal Place of Business:

10621 SW 88TH STREET, STE. 120
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 160
FT. WHITE, FL 32038

New Mailing Address:

FEI Number: 03-0448521 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:

CASTRO, DAVID A
212 SW BRYANT AVE
FT. WHITE, FL 32038 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CASTRO, DAVID A
Address: 212 SW BRYANT AVE
City-St-Zip: FT. WHITE, FL 32038

Title: VPD () Delete
Name: CASTRO, J. GABRIEL
Address: 10125 SW 91ST TERRACE
City-St-Zip: MIAMI, FL 33176

Title: SEC () Delete
Name: CASTRO, MARLENE E
Address: 212 SW BRYANT AVE
City-St-Zip: FT WHITE, FL 32038

Title: D () Delete
Name: MILLER, WILLIAM J
Address: 10621 N. KENDALL DR., #113
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: HOOPER, LARRY K
Address: 950 N. KROME AVE., #106
City-St-Zip: HOMESTEAD, FL 33013

Title: TRE (X) Delete
Name: HERRERA, TANIA M
Address: 10621 SW 88TH ST. #120
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: DAVID A. CASTRO

PD

05/27/2008

Electronic Signature of Signing Officer or Director

_____ Date