

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004644

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: ST. PAUL COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

3680 THOMAS AVENUE  
MIAMI, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

3680 THOMAS AVENUE  
MIAMI, FL 33133

**New Mailing Address:**

FEI Number: 27-0020882

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, JUANITA  
3510 FROW AVENUE  
MIAMI, FL 33133 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: P ( ) Delete  
Name: HARVIN, JR., JESSIE  
Address: 3680 THOMAS AVENUE  
City-St-Zip: MIAMI, FL 33133

Title: V ( ) Delete  
Name: WRIGHT, KATRINA  
Address: 12976 S.W. 214 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete  
Name: WILLIAMS, BARBARA  
Address: 3925 WASHINGTON AVE  
City-St-Zip: MIAMI, FL 33133

Title: ASD ( ) Delete  
Name: JORDAN, BARBARA  
Address: 6241 SW 58 STREET  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: BENNIE, CHAPMAN  
Address: 3360 FLORIDA AVE  
City-St-Zip: MIAMI, FL 33133

Title: TD ( ) Delete  
Name: SMITH, JUANITA  
Address: 3510 FROW AVENUE  
City-St-Zip: MIAMI, FL 33133

**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:

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: JESSIE HARVIN, JR.

P

03/19/2009

Electronic Signature of Signing Officer or Director

Date