2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED DOCUMENT # N02000007582 Mar 01, 2007 08:00 AM 1. Entity Name **Secretary of State** BRADENTON FRONT PORCH FLORIDA COMMUNITY DEVELOPMENT CORPORATION Principal Place of Business Mailing Address 6267 38TH ST. E. BRADENTON FL 34203 6267 38TH ST. E. BRADENTON FL 34203 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & Stato City & State 4. FEI Number Applied For 82-0564359 Not Applicable Zıp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HALLIBURTON, SHEROD A Street Address (P.O. Box Number is Not Acceptable) 1213 50TH ST. E. **BRADENTON FL 34208** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed harne of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. THLE Delete U00000652744 FITTE Change ☐ Addition NAME JENKINS, JR, THEODORE NAME 03/12/07-80029-025 61.25 STREET ADDRESS STREET ADORESS 6267 38TH STREET, EAST CITY-ST-71P CHY-S1-7IP **BRADENTON FL 34203** THIE ☐ Delete our. ☐ Change VCD Addition NAME CARNEGIE, PATRICK NAME STREET ADDRESS STREET ADDRESS 201 13TH AVE, WEST CHY-SI-ZIP **BRADENTON FL 34205** CHY+ST-ZIP Addition HHE Delete TD Change NAME DIXON, LONNIE NAMI STREET ADDRESS STREET ADDRESS 1406 14TH STREET, EAST CITY-ST-71P CHY-SI-ZP **BRADENTON FL 34208** THE ☐ Delete Change ☐ Addition 1171.6 NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP mu Delete MÆ ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-S1-7P

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other incompowered.

IIILE

NAME

STREET ADDRESS CHY-ST-ZIP

☐ Delete

SIGNATURE:

TITLE

NAME

STRLL LADDRESS

Ha THEWORE JENKINS, JI

2/26/07

(941) 962-1047

☐ Change

Addition