

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 07, 2011**  
**Secretary of State**

DOCUMENT# N02000008006

**Entity Name:** ELIJAH NETWORK FAMILY AND COMMUNITY ALLIANCE, INC.**Current Principal Place of Business:**22400 OLD DIXIE HIGHWAY  
2D  
MIAMI, FL 33170**New Principal Place of Business:****Current Mailing Address:**22400 OLD DIXIE HIGHWAY  
2D  
MIAMI, FL 33170**New Mailing Address:****FEI Number:** 37-1445612      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WITTE, KATHLEEN T  
26420 S.W. 173 COURT  
HOMESTEAD, FL 33031      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:** PRES  
**Name:** GARCIA, MARIO  
**Address:** ER GRAHAM BLDG 350 N.W. 12 AVENUE  
**City-St-Zip:** MIAMI, FL 33136**Title:** SEC  
**Name:** HALL, JOCYLYN  
**Address:** 23631 S.W. 112 COURT  
**City-St-Zip:** HOMESTEAD, FL 33032**Title:** TD  
**Name:** KLEIN, LAURA  
**Address:** 14049 SW 166 ST  
**City-St-Zip:** MIAMI, FL 33177**Title:** D  
**Name:** MCMILLAN, ALTHEA  
**Address:** 18151 S.W. 98 COURT  
**City-St-Zip:** MIAMI, FL 33157

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN WITTE

RA

11/07/2011

Electronic Signature of Signing Officer or Director

Date