

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000534

FILED  
Apr 02, 2007  
Secretary of State

Entity Name: EXCEL COMMUNITY DEVELOPMENT CORP.

**Current Principal Place of Business:**

1508 WEST LARUA STREET  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

3001 HIGHPOINTE PL  
PENSACOLA, FL 32505

**New Mailing Address:**

FEI Number: 14-1905969      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CRENSHAW, JOHN BISHOP  
1508 WEST LARUA 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: VP                    ( ) Delete  
Name: CRENSHAW, JOHN BISHOP  
Address: 3001 HIGH POINTE PL  
City-St-Zip: PENSACOLA, FL 32505

Title: P                      ( ) Delete  
Name: CRENSHAW, JANICE DR.  
Address: 3001 HIGH POINTE PL  
City-St-Zip: PENSACOLA, FL 32505

Title: S                      ( ) Delete  
Name: LEWIS, JANIECE  
Address: 3665 E. JOHNSON AVE  
City-St-Zip: PENSACOLA, FL 32514

Title:                        ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:                        ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: T                      (X) Change ( ) Addition  
Name: LEWIS, JANIECE  
Address: 570 SHILOH DR.  
City-St-Zip: PENSACOLA, FL 32503

Title: S                      ( ) Change (X) Addition  
Name: MOORE, NICOLE  
Address: 604 TWO SISTERS WAY  
City-St-Zip: PENSACOLA, FL 32503

Title: D                      ( ) Change (X) Addition  
Name: JENNINGS, KIM  
Address: 5052 CASSIA DR.  
City-St-Zip: PENSACOLA, FL 32506

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: JANICE CRENSHAW, PRESIDENT

DR.

04/02/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date