


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90095 011 ****70.00

DOCUMENT # N03000001122					
1. Entity Name UNITED C.B'ERS OF FLORIDA, INC.					
Principal Place of Business 550 N.W. 30TH TERRACE FORT LAUDERDALE, FL 33311-7642			Mailing Address 550 N.W. 30TH TERRACE FORT LAUDERDALE, FL 33311-7642		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 11-3672029	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GRAY-KNIGHT, GLORIA 550 N.W. 30TH TERRACE FORT LAUDERDALE, FL 33311-7642			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		FL
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	Business Manager / D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HALL, JOHN		NAME	Vonidell Wiley	
STREET ADDRESS	6349 NW 22ND COURT		STREET ADDRESS	601 N.W. 18th Court	
CITY-ST-ZIP	MARGATE, FL 330636928		CITY-ST-ZIP	Pompano Beach, FL 33060	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KNIGHT, GLORIA GRAY		NAME	Sonya Addison	
STREET ADDRESS	550 N.W. 30TH TERRACE		STREET ADDRESS	601 N.W. 18th Court	
CITY-ST-ZIP	FORT LAUDERDALE, FL 333117642		CITY-ST-ZIP	Pompano Beach, FL 33060	
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REID, GLORIA		NAME		
STREET ADDRESS	536 NW 2ND TERR		STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, LILLY		NAME		
STREET ADDRESS	6347 NW 22ND COURT		STREET ADDRESS		
CITY-ST-ZIP	MARGATE, FL 330636928		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACKSON, GERALD		NAME		
STREET ADDRESS	6826 CAVALIER RD.		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32208		CITY-ST-ZIP		
TITLE	VP/D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILEY, KENNETH		NAME		
STREET ADDRESS	555 NW 29TH TERRACE		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33311		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gloria Gray Knight - Gloria Gray Knight</i>		Date: <i>1/18/07</i>		Daytime Phone #: <i>(954) 792-3084</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	