

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 13, 2007**  
**Secretary of State**

DOCUMENT# N03000006618

**Entity Name:** THE WAY COMMUNITY DEVELOPMENT CORPORATION**Current Principal Place of Business:**840 NW 168 DR  
MIAMI, FL 33169**New Principal Place of Business:****Current Mailing Address:**840 NW 168 DR  
MIAMI, FL 33169**New Mailing Address:****FEI Number:** 20-0314588**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WASHINGTON, WILLIAM  
840 NW 168 DR  
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**WASHINGTON, WILLIAM E P&S  
840 NW 168 DR  
MIAMI, FL 33169 US

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: WILLIAM E. WASHINGTON SR.

08/13/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: WASHINGTON, WILLIAM  
Address: 840 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

Title: D (X) Delete  
Name: GUEVARA, MARY D  
Address: 840 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

Title: CHAP (X) Delete  
Name: SMITH, GASTON  
Address: 840 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

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

Title: P&S (X) Change ( ) Addition  
Name: WASHINGTON, WILLIAM E SR.  
Address: 840 NW 168 DR  
City-St-Zip: MIAMI, FL 33169

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: WILLIAM E. WASHINGTON SR.

P&amp;S

08/13/2007

Electronic Signature of Signing Officer or Director

Date