


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90172 045 ****70.00

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| DOCUMENT # N03000007077 | |  | |
| 1. Entity Name CITIZENS OF CAMBRIDGE, INC. | | | |
| Principal Place of Business 4410 MARSH HAWK DR S JACKSONVILLE FL 32218 | | Mailing Address 4410 MARSH HAWK DR S JACKSONVILLE FL 32218 | |
| 2. Principal Place of Business 4298 Broad Creek Lane Suite, Apt. #, etc. | | 3. Mailing Address P. O. Box 28727 Suite, Apt. #, etc. | |
| City & State Jacksonville, FL | | City & State Jacksonville, FL | |
| Zip 32218 | Country Duval | Zip 32226-8727 | Country Duval |
| 6. Name and Address of Current Registered Agent WILLIAMS, G. EVERETT B I 3721 HENDRICKS AVE JACKSONVILLE FL 32207 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
| 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2005 | | 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 NAME STREET ADDRESS CITY-ST-ZIP | DC CREWS, SIMEON 4410 MARSH HAWK DR S JACKSONVILLE FL 32218 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVC Hughes, Joni 4298 Broad Creek Lane Jacksonville, FL 32218 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVC MITCHELL, VANESSA 10335 SONG SPARROW DR JACKSONVILLE FL 32218 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Ford, Johnnie Jr. 10339 Woodley Pointe Road Jacksonville, FL 32218 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MALONE, AGNES 4306 MARSH HAWK DR S JACKSONVILLE FL 32218 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BROWN, ANNIE 4498 MARSH HAWK DR S JACKSONVILLE FL 32218 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Jordan, Frederick 3601 Broad Creek Lane Jacksonville FL 32218 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | WILLIAMS, G. EVERETT B I 10228 WOODLEY CREEK ROAD WEST JACKSONVILLE FL 32218 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HUGHES, DEWITT 4298 BROAD CREEK LANE JACKSONVILLE FL 32218 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 G. Everett B. Williams, I. G. Everett B. Williams, I/Director 4/30/05 904/398-1951
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT 50047705
N0300007077

Addendum To Officers and Directors Line 10

| 40. | Officers and Directors | 11. | Additions/Changes To Officers and Directors in 10 |
|--|--|--|--|
| Title Name Street Address City-St-Zip | D <u>X</u> Delete Christan Shuford 4458 Marsh Hawk Dr., S. Jacksonville, FL 32218 | Title Name Street Address City-St-Zip | D <u>Change</u> <u>X</u> Addition Smith, Olinka 10373 Woodley Creek Road, West Jacksonville, FL 32218 |
| Title Name Street Address City-St-Zip | | Title Name Street Address City-St-Zip | D <u>Change</u> <u>X</u> Addition Williams, Charolett M. 4428 Woodley Creek Road Jacksonville, FL 32218 |
| Title Name Street Address City-St-Zip | | Title Name Street Address City-St-Zip | AT <u>Change</u> <u>X</u> Addition Lee, Denise 10356 Woodley Creek Road, West Jacksonville, FL 32218 |
| Title Name Street Address City-St-Zip | | Title Name Street Address City-St-Zip | |
| Title Name Street Address City-St-Zip | | Title Name Street Address City-St-Zip | |
| Title Name Street Address City-St-Zip | | Title Name Street Address City-St-Zip | |