

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 09, 2006 8:00 am**  
**Secretary of State**

05-09-2006 90066 026 \*\*\*\*70.00

<b>DOCUMENT # N03000007077</b> 1. Entity Name CITIZENS OF CAMBRIDGE, INC.																																																																																																																													
Principal Place of Business 4298 BROAD CREEK LANE JACKSONVILLE, FL 32218				Mailing Address P.O. BOX 28727 JACKSONVILLE, FL 32226																																																																																																																									
2. Principal Place of Business		3. Mailing Address																																																																																																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																											
City & State		City & State																																																																																																																											
Zip	Country	Zip	Country	4. FEI Number 56-2398466																																																																																																																									
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable																																																																																																																									
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 <div style="display: flex; justify-content: space-between;"> <span>FL</span> <span>Zip Code</span> </div>																																																																																																																										
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 reappointing)</small> <div style="float: right;">DATE</div>																																																																																																																													
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																																																																																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 85%; padding: 2px;">           DVC            HUGHES, JONI            4298 BROAD CREEK LANE            JACKSONVILLE, FL 32218         </td> <td style="width: 10%; text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td colspan="2"></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td colspan="2"></td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">D</td> <td style="text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td colspan="2">FORD, JR, JOHNNIE</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2">10339 WOODLEY POINTE ROAD</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td colspan="2">JACKSONVILLE, FL 32218</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">D</td> <td style="text-align: right; padding: 2px;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td colspan="2">MALONE, AGNES</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2">4306 MARSH HAWK DR S</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td colspan="2">JACKSONVILLE, FL 32218</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">D</td> <td style="text-align: right; padding: 2px;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td colspan="2">JORDAN, FREDERICK</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td colspan="2">3601 BROAD CREEK LANE</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td colspan="2">JACKSONVILLE, FL 32218</td> </tr> <tr> <td style="padding: 2px;">TITLE</td> <td style="padding: 2px;">DC</td> <td style="text-align: right; padding: 2px;"><input type="checkbox"/> Delete</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td colspan="2">WILLIAMS, G. 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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.																																																																																																																													
<b>SIGNATURE:</b> <b>G. Everett B. Williams, I/Chairman 4/29/06 9043981951</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <div style="float: right;"> <small>Date</small> <span style="margin-left: 100px;"><small>Daytime Phone #</small></span> </div>																																																																																																																													

# ATTACHMENT

40089001

#103000007077

## Addendum To Officers and Directors Line 10

10.	Officers and Directors	11.	Additions/Changes To Officers and Directors in 10
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	D Williams, Charlotte M. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4428 Woodley Creek Road Jacksonville, FL 32218
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	D Madison, Steven <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4107 Woodley Creek Road Jacksonville, FL 32218
Title Name Street Address City-St-Zip	AT <input type="checkbox"/> Delete Lee, Denise 10356 Woodley Creek Road, West Jacksonville, FL 32218	Title Name Street Address City-St-Zip	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robinson, Reola 4153 Clearbrook Cove Road Jacksonville, FL 32218
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Wells, Verdell 10356 Woodley Creek Road, West Jacksonville, FL 32218
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robinson, Dedric 4114 Clearbrook Cove Road Jacksonville, FL 32218