

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 16, 2007 8:00 am**  
**Secretary of State**

05-16-2007 90016 033 \*\*\*\*70.00

<b>DOCUMENT # N03000007077</b> 1. Entity Name <b>CITIZENS OF CAMBRIDGE, INC.</b>			
Principal Place of Business <b>4298 BROAD CREEK LANE JACKSONVILLE, FL 32218</b>		Mailing Address <b>P.O. BOX 28727 JACKSONVILLE, FL 32226</b>	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address <b>P.O. Box 28812</b> Suite, Apt. #, etc.	
City & State <b>JACKSONVILLE, FL</b>		4. FEI Number <b>56-2398466</b>	
Zip <b>32226-8812</b>		Country <b>U.S.A</b>	
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 <b>WILLIAMS, G. EVERETT B I 3721 HENDRICKS AVE JACKSONVILLE, FL 32207</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVC HUGHES, JONI 4298 BROAD CREEK LANE JACKSONVILLE, FL 32218</b> <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	<b>D FORD, JR. JOHNNIE 10339 WOODLEY POINTE ROAD JACKSONVILLE, FL 32218</b> <input checked="" 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	<b>D SMITH, OLINKA 10380 WOOKLEY CREEK ROAD WEST JACKSONVILLE, FL 32218</b> <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	<b>D BOYKINS, GLENN 4091 WOODLEY CREEK ROAD JACKSONVILLE, FL 32218</b> <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	<b>DC WILLIAMS, G. EVERETT B I 10228 WOODLEY CREEK ROAD WEST JACKSONVILLE, FL 32218</b> <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	<b>P HUGHES, DEWITT 4298 BROAD CREEK LANE JACKSONVILLE, FL 32218</b> <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 exemptions contained in Chapter 118, 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> <i>Glenn Boykins</i> <i>G. Everett Burghardt Williams, Jr.</i> <b>04/30/07</b> <b>904-338-1951</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

ATTACHMENT 40114368

#N03000007077

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	D Williams, Charlotte M. <input type="checkbox"/> Delete 4428 Woodley Creek Road Jacksonville, FL 32218	Title Name Street Address City-St-Zip	AT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Williams, Charlotte M. 4428 Woodley Creek Road Jacksonville, FL 32218
Title Name Street Address City-St-Zip	D Madison, Steven <input type="checkbox"/> Delete 4107 Woodley Creek Road Jacksonville, FL 32218		
Title Name Street Address City-St-Zip	T Lee, Denise <input type="checkbox"/> Delete 10356 Woodley Creek Road, West Jacksonville, FL 32218	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	VP Robinson, Dedric <input type="checkbox"/> Delete 4114 Clearbrook Cove Road Jacksonville, FL 32218	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	S Robinson, Reola <input type="checkbox"/> Delete 4153 Clearbrook Cove Road Jacksonville, FL 32218	Title Name Street Address City-St-Zip	
Title Name Street Address City-St-Zip	AS Wells, Verdell <input type="checkbox"/> Delete 10356 Woodley Creek Road, West Jacksonville, FL 32218	Title Name Street Address City-St-Zip	AS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Wells, Verdell 4082 Woodley Creek Road Jacksonville, FL 32218
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Delifus, Daniel 4274 Broad Creek Lane Jacksonville, FL 32218
Title Name Street Address City-St-Zip		Title Name Street Address City-St-Zip	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jackson, Melissa 3954 Anderson Woods Drive Jacksonville, FL 32218