

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007154

FILED
May 29, 2007
Secretary of State

Entity Name: APALACHICOLA COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

151 TENTH STREET
APALACHICOLA, FL 32320

New Principal Place of Business:

150 TENTH STREET
APALACHICOLA, FL 32320

Current Mailing Address:

P.O. BOX 237
APALACHICOLA, FL 32329

New Mailing Address:

FEI Number: 20-4565616 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WHITE, SHIRLEY C
148 AVENUE M
APALACHICOLA, FL 32320 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHITE, SHIRLEY C
Address: 148 AVENUE M
City-St-Zip: APALACHICOLA, FL 32320

Title: SD () Delete
Name: WINTONS, TEMOLYN W
Address: 178 22ND AVENUE
City-St-Zip: APALACHICOLA, FL 32320

Title: TD () Delete
Name: MARTIN, LEONARD D
Address: 183 12TH STREET
City-St-Zip: APALACHICOLA, FL 32320

Title: VD () Delete
Name: DAVIS, ROBERT L
Address: 214 AVE K
City-St-Zip: APALACHICOLA, FL 32320

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: STANLEY, ANGELINE
Address: 141 AVENUE L
City-St-Zip: APALACHICOLA, FL 32320

Title: TD (X) Change () Addition
Name: WILLIAMS, NIKITA
Address: 202 - 12TH STREET
City-St-Zip: APALACHICOLA, FL 32320

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: ROBERT L. DAVIS

VD

05/29/2007

Electronic Signature of Signing Officer or Director

Date