

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 01, 2008 8:00 am**  
**Secretary of State**

04-01-2008 90011 025 \*\*\*\*61.25

**DOCUMENT # N03000009724**

1. Entity Name  
**THE CHRISTIAN COMMUNITY FOUNDATION OF SOUTH  
FLORIDA, INC.**



Principal Place of Business  
**5120 NORTH FEDERAL HWY.  
FORT LAUDERDALE, FL 33308**

Mailing Address  
**5120 NORTH FEDERAL HWY.  
FORT LAUDERDALE, FL 33308**



02282008 No Chg-NP

CR2E037 (4/06)

4. FEI Number  
**86-1088673**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**FORMAN, H. COLLINS JR.  
1323 SE 3RD AVE.  
FORT LAUDERDALE, FL 33316**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
BARRETT, SCOTT  
500 JIM MORAN BLVD.  
DEERFIELD BEACH, FL 33442**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
DAVIS, MARK  
1461 NE 56TH COURT  
FT. LAUDERDALE, FL 33334**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SHELTON, TOM  
5750 N. FEDERAL HWY.  
FT. LAUDERDALE, FL 33308**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
FORMAN, H. COLLINS JR.  
1323 SE 3RD AVE.  
FORT LAUDERDALE, FL 33316**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
JACOB, STEVE  
P.O. BOX 11941  
FT. LAUDERDALE, FL 33339**  
*WAYNE COTTON  
3001 NE 27TH AVE. FL 33064  
LIGHTHOUSE PT.*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
MANSOUR, MARK  
2610 NE 40TH ST.  
FT. LAUDERDALE, FL 33308**

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

H. Collins

Forman, Jr.

03/18/08

Date

954 764-0005

Daytime Phone #