2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000002942

1. Entity Name
PRINCE OF PEACE MORAVIAN CHURCH COMMUNITY DEVELOPMENT CORPORATION

Principal Place of Business	Mailing Address
1880 NW 183 ST MIAMI, FL 33056	1880 NW 183 ST MIAMI, FL 33056

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07092006 No Chg-NP CR2E037 (4/06)

4. FEI Number
20-1001814
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MASON, JEFFREY G
1880 NW 183 ST
MIAMI, FL 33056

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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 reinstating) DATE

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	PATTERSON, LASCELLES
STREET ADDRESS	1880 NW 183 ST
CITY-ST-ZIP	MIAMI, FL 33056
TITLE	D
NAME	MASON, JEFFREY
STREET ADDRESS	1880 NW 183 ST
CITY-ST-ZIP	MIAMI, FL 33056
TITLE	D
NAME	PEART, JUSTIN
STREET ADDRESS	311 NW 87 DRIVE, APT 209
CITY-ST-ZIP	PLANTATION, FL 33324
TITLE	D
NAME	WRIGHT, CAROLINE DR
STREET ADDRESS	605 NW 214 STREET, APT 103
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	D
NAME	WILDE, TED REV
STREET ADDRESS	75 NW 209 STREET
CITY-ST-ZIP	MIAMI, FL 33169
TITLE	D
NAME	SMITH, NORMA
STREET ADDRESS	3300 NW 200 STREET
CITY-ST-ZIP	MIAMI, FL 33055

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07/13/06-80019-009 61.25

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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.

SIGNATURE: J Mason - JEFFREY MASON 07/09/06 954-661-6138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Title Daytime Phone #