

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003202

FILED
Mar 30, 2012
Secretary of State

Entity Name: SNOOP'S COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

2259 COURTNEY DRIVE
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12669
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 33-1115996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FARRA, ISHAEL E
2259 COURTNEY DRIVE
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

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: P
Name: THOMAS, RONNIE
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP
Name: EAVES, JOSHUA
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

Title: S
Name: THOMAS, PATRICE
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

Title: T
Name: EAVES, AYESHIA
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

Title: D
Name: EAVES, CALEB
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

Title: D
Name: EAVES, JOSIAH
Address: P.O. BOX 12669
City-St-Zip: JACKSONVILLE, FL 32209

I hereby 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 all other like empowered.

SIGNATURE: PATRICE THOMAS

S

03/30/2012

Electronic Signature of Signing Officer or Director

Date