

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003659

FILED
Sep 08, 2005
Secretary of State

Entity Name: CHRISTIAN MULTI-CULTURAL ECONOMIC DEVELOPMENT ALLIANCE, INC. (C.M.E.D.A.)

Current Principal Place of Business:

945 WEST MICHIGAN AVENUE, SUITE 12-B
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

945 WEST MICHIGAN AVENUE, SUITE 12-B
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 03-0543799 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

FRANKLIN, EUGENE
945 WEST MICHIGAN AVENUE, SUITE 12-B
PENSACOLA, FL 32505 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: PCEO () Delete
Name: FRANKLIN, EUGENE
Address: 945 WEST MICHIGAN AVENUE, SUITE 12-B
City-St-Zip: PENSACOLA, FL 32505

Title: CD () Delete
Name: SMITH, FRANK CAPTAIN
Address: 2306 MALYSA PLACE
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: CRENSHAW, JOHN BISHOP
Address: 1508 WEST LARUA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete
Name: MALLORY, BARBARA REV.
Address: 1240 WEST SCOTT STREET
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: ABNEY, ROSA PASTOR
Address: 3810 FAIRFIELD DRIVE
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: MOULTRIE, BEAUBORN D
Address: 2204 NORTH
City-St-Zip: PENSACOLA, FL 32505

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EUGENE FRANKLIN

PRES

09/08/2005

Electronic Signature of Signing Officer or Director

Date