

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007416

FILED  
Sep 01, 2005  
Secretary of State

**Entity Name:** 4TH STREET COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

750 EUCLID AVE SUITE 5  
MIAMI, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

750 EUCLID AVE SUITE 5  
MIAMI, FL 33139

**New Mailing Address:**

**FEI Number:** 73-1712189      **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:**

MITCHELL, BRADFORD  
750 EUCLID AVE SUITE 5  
MIAMI, FL 33139      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: D ( ) Delete  
Name: MILLER, AARON  
Address: 2650 LINCOLN STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: D ( ) Delete  
Name: FORD, FRED  
Address: 17092 COLLINS AVE C312  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: D ( ) Delete  
Name: WEST, IVAN  
Address: 3800 NW 18TH STREET  
City-St-Zip: MIAMI, FL 33055

Title: D ( ) Delete  
Name: MITCHELL, BRADFORD  
Address: 750 EUCLID AVE SUITE 5  
City-St-Zip: MIAMI, FL 33139

Title: D ( ) Delete  
Name: AMMONS, TONY  
Address: 2001 ART MUSEUM DR  
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete  
Name: ERTUR, DAVID  
Address: 581 NW 158TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

**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: BRADFORD MITCHELL

D

09/01/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date