

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000293

FILED
Apr 22, 2006
Secretary of State

Entity Name: POTENTIAL COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

2140 NE 2 STREET
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

PO BOX 290
LACROSSE, FL 32658

New Mailing Address:

PO BOX 5665
GAINESVILLE, FL 32627

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

Name and Address of Current Registered Agent:

PHILLIPS, JANICE
2140 NE 2 STREET
GAINESVILLE, FL 32609 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: PD () Delete
Name: PHILLIPS, ANTHONY
Address: PO BOX 290
City-St-Zip: LACROSSE, FL 32658

Title: VD () Delete
Name: PHILLIPS, JANICE
Address: PO BOX 290
City-St-Zip: LACROSSE, FL 32658

Title: SD (X) Delete
Name: LUMPKINS, TAWANNA
Address: PO BOX 1795
City-St-Zip: ALACHUA, FL 32615

Title: TD () Delete
Name: COVERT, DARCELL
Address: 1127 NW 16 AVE
City-St-Zip: GAINESVILLE, FL 32601

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: SD (X) Change () Addition
Name: COVERT, DARCELL
Address: 1127 NW 16 AVE
City-St-Zip: GAINESVILLE, FL 32601

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: JANICE E PHILLIPS

V

04/22/2006

Electronic Signature of Signing Officer or Director

Date