

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002463

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE CIVIL RURAL DEVELOPMENT PROJECT, INC.

Current Principal Place of Business:

1140 W 50TH STREET
SUITE 405
HIALEAH, FL 33012 US

New Principal Place of Business:

Current Mailing Address:

4115 SW 116TH AVENUE
MIAMI, FL 33165 US

New Mailing Address:

FEI Number: 38-3722781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TARACIDO, NELSON ESQ
5825 SUNSET DRIVE
SUITE 210
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

RODRIGUEZ, DIOSMEL
1140 W 50TH STREET
SUITE 405
HIALEAH, FL 33012 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: DIOSMEL RODRIGUEZ

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: HERNANDEZ, JADIR
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

Title: P () Delete
Name: ALONSO, JUAN A
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

Title: ED () Delete
Name: RODRIGUEZ, DIOSMEL
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

Title: FD () Delete
Name: DOMINGUEZ, CLAUDIO M
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

Title: D () Delete
Name: PESTANO, BERNARDO
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

Title: D () Delete
Name: CARDENAS, FROILAN M
Address: 1140 W 50TH STREET SUITE 405
City-St-Zip: HIALEAH, FL 33012 US

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 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: JUAN ALONSO

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date