2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006895

FILED Jan 18, 2006 Secretary of State

Entity Name: DR. WILLIE MCHENRY COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2881 NW 13TH STREET POMPANO BEACH, FL 33069				
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
2881 NW 13TH STREET POMPANO BEACH, FL 33069				
FEI Number:	FEI Number Applied For() FE	l Number Not Applicable (X)	Certificate of Status Desired (X)	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
MCHENRY, QUEEN O 2881 NW 13TH STREET POMPANO BEACH, FL 33069 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:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () Delete MCHENRY, QUEEN O 2581 N.W. 12TH STREET POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () Delete RUSSELL, CHARLIE 4145 N.W. 59TH STREET COCONUT CREEK, FL 33073	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () Delete SPENCER, DELTON D 1010 N.W. 23RD TERRACE POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () Delete ROBERTS, LEONARDA 701 N.W. 23RD TERRACE POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WILLIAMS, VELMINA 150 NE 6TH STREET DEERFIELD BEACH, FL 33441	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: QUEEN O. MCHENRY DP 01/18/2006