

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008069

FILED
Apr 27, 2006
Secretary of State

Entity Name: CENTER FOR COMMUNITY ADVANCEMENT, INC.

Current Principal Place of Business:

516 N. LUNA CT.
HOLLYWOOD, FL 33021

New Principal Place of Business:

2332 N DIXIE HIGHWAY
HOLLYWOOD, FL 33020

Current Mailing Address:

516 N. LUNA CT.
HOLLYWOOD, FL 33021

New Mailing Address:

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

Name and Address of Current Registered Agent:

BOYKIN, BENJAMIN J.
516 N. LUNA CT.
HOLLYWOOD, FL 33021 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: P () Delete
Name: BOYKIN, BENJAMIN J.
Address: 516 N. LUNA CT.
City-St-Zip: HOLLYWOOD, FL 33021

Title: S () Delete
Name: HALL, TIFFANY
Address: 1201 NE 176 TERRACE
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: T () Delete
Name: ORTIZ, WILLIAM
Address: 12148 ST. ANDREWS PLACE, STE. 112
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: ARMBRISTER, MYRTIS
Address: 516 N. LUNA CT.
City-St-Zip: HOLLYWOOD, FL 33021

Title: D () Delete
Name: LOTT, GILLIAN
Address: 1451 NE 169 ST., STE. 210
City-St-Zip: N. MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: ORTIZ, WILLIAM
Address: 8390 N MISSIONWOOD CIRCLE
City-St-Zip: MIRAMAR, FL 33025

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 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: BENJAMIN BOYKIN

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date