

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011085

FILED  
Jun 18, 2009  
Secretary of State

**Entity Name:** THE MADISON COUNTY COMMUNITY ECONOMIC DEVELOPMENT AGENCY, INC.

**Current Principal Place of Business:**

2739 S.W. PETTIS SPRINGS CIRCLE  
GREENVILLE, FL 32331

**New Principal Place of Business:**

**Current Mailing Address:**

2739 S.W. PETTIS SPRINGS CIRCLE  
GREENVILLE, FL 32331

**New Mailing Address:**

**FEI Number:** 43-2090817      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

EVANS, LAKAYE  
2739 S.W. PETTIS SPRINGS CIRCLE  
GREENVILLE, FL 32331 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: EVANS, CHARLES SR.  
Address: 2303 S.W. PETTIS SPRINGS CIRCLE  
City-St-Zip: GREENVILLE, FL 32331

Title: T ( ) Delete  
Name: WILLIAMS, RODERICK  
Address: 619 SOUTH HERRY STREET  
City-St-Zip: MADISON, FL 32340

Title: S ( ) Delete  
Name: EVANS, LAKAYE  
Address: 2739 S.W. PETTIS SPRINGS CIRCLE  
City-St-Zip: GREENVILLE, FL 32331

Title: V ( ) Delete  
Name: GLEE, ULYSSES S DR  
Address: 720 CAPITOL SQUARE SW  
City-St-Zip: WASHINGTON, DC 20024

Title: D ( ) Delete  
Name: BROOKS, LEON DR  
Address: 9837 QUIET BROOK LANE  
City-St-Zip: CLINTON, MD 20785

Title: D ( ) Delete  
Name: WYCHE, JEROME  
Address: 204 SE ABERTHNATHY RD  
City-St-Zip: MADISON, FL 32340

**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: CHARLES EVANS, SR.

P

06/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date