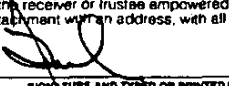


FILED
May 07, 2007 8:00 am
Secretary of State

04-05-2007 90142 048 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N06000003211			
1. Entity Name CHRISTIAN COALITION FOR ACTION AND DEVELOPMENT INC			
Principal Place of Business 7500 ALHAMBRA BLVD MIRAMAR, FL 33023		Mailing Address 7500 ALHAMBRA BLVD MIRAMAR, FL 33023	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		04022007 Chg-NP CR2E037 (12/06)	
4. FEI Number 5211902626		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AM REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351		7. Name and Address of New Registered Agent Name BUDRY R. DANIEL Street Address (P.O. Box Number is Not Acceptable) 9012 WHITFIELD DR City ESTERO FL Zip Code 33928	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	OP EUGENE, DANIELLE 7500 ALHAMBRA BLVD MIRAMAR, FL 33023 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DV LOUIS, TROXLER 1711 SW 83RD TER MIRAMAR, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DS ST-JEAN, LUNISE 83 NW 68TH TER MIRAMAR, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DT BELIZAIRE, UNELLE 1101 151ST TER MIAMI, FL 33162 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D SAM, ADRIENNE G 8259 WINDSOR DR MIRAMAR, FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		BUDRY R. DANIEL, Ex. Dir 4/3/07 954-559-2743	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	