

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003903

FILED
Mar 21, 2007
Secretary of State

Entity Name: A HEART FOR THE COMMUNITY INC.

Current Principal Place of Business:

173 NW 30TH TERR
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

173 NW 30TH TERR
FT LAUDERDALE, FL 33311

New Mailing Address:

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

Name and Address of Current Registered Agent:

SPENCER, SELINA
173 NW 30TH TERR
FT LAUDERDALE, FL 33311 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: SPENCER, SELINA
Address: 173 NW 30TH TERR
City-St-Zip: FT LAUDERDALE, FL 33311

Title: S () Delete
Name: SPENCER, PATRICIA
Address: 173 NW 30TH TERR
City-St-Zip: FT LAUDERDALE, FL 33311

Title: VP () Delete
Name: BROWN, QUINTON
Address: 15825 NW 27TH AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: T () Delete
Name: VICKERS BROWN, EUNICE
Address: 2944 NW 192 TERR
City-St-Zip: MIAMI GARDENS, FL 33056

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: T (X) Change () Addition
Name: VICKERS OLIVER, EUNICE
Address: 2944 NW 192 TERR
City-St-Zip: MIAMI GARDENS, FL 33056

Title: D () Change (X) Addition
Name: HAMILTON, ANDREA
Address: 1370 NW 123 AVE
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D () Change (X) Addition
Name: WILLIAMS, JAMALA
Address: 5838 NW 21ST
City-St-Zip: LAUDERHILL, FL 33313

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: SELINA SPENCER

P

03/21/2007

Electronic Signature of Signing Officer or Director

Date