2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005250

FILED Mar 20, 2007 Secretary of State

Entity Name: GLOBAL COMMUNITY DEVELOPMENT INC.

Current Principal Place of Business: New Principal Place of Business:

110 PHONETIA AVENUE CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

110 PHONETIA AVENUE CORAL GABLES, FL 33134 US

FEI Number: 20-4924625 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SILVERMAN, MARK F PADOVAN, PAOLA
110 PHONETIA AVENUE
CORAL GABLES, FL 33134 US PADOVAN, PAOLA
110 PHONETIA AVENUE
CORAL GABLES, FL 33134 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: PAOLA PADOVAN 03/20/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: VP (X) Change () Addition
Name: SILVERMAN, MARK F Name: PADOVAN, PAOLA
Address: 110 PHONETIA AVENUE
City St Zin: CORAL CARLES EL 232124 LIS

City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: (X) Change () Addition Name: PADOVAN, PAOLA Name: BEYHAUT, PATRICIA Address: 110 PHONETIA AVENUE Address: 110 PHONETIA AVENUE City-St-Zip: CORAL GABLES, FL 33134 US City-St-Zip: CORAL GABLES, FL 33134 US

Title: T () Delete Title: S (X) Change () Addition

Name:BEYHAUT, PATRICIAName:ADAMS, DAVIDAddress:110 PHONETIA AVENUEAddress:110 PHONETIA AVENUECity-St-Zip:CORAL GABLES, FL 33134 USCity-St-Zip:CORAL GABLES, FL 33134 US

Title: S (X) Delete Title: () Change () Addition

 Name:
 ADAMS, DAVID
 Name:

 Address:
 110 PHONETIA AVENUE
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33134 US
 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: PAOLA PADOVAN VP 03/20/2007