## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006391

FILED May 01, 2009 Secretary of State

Entity Name: DE SOTO COUNTY COMMUNITY DEVELOPMENT CORPORATION

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

1937 SW HENDRY ST. 3048 SE BROWN ROAD ARCADIA, FL 34266 ARCADIA, FL 34266

Current Mailing Address: New Mailing Address:

P. O. BOX 2013 P. O. BOX 2013 ARCADIA, FL 34265 P. O. BOX 2013 ARCADIA, FL 34265

FEI Number: 75-3217651 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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: Name and Address of New Registered Agent:

BOWERS, RICHARD

1937 SW HENDRY ST.

ARCADIA, FL 34266 US

MORGAN, SAMUEL

3048 SE BROWN STREET

ARCADIA, FL 34266 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: SAMUEL MORGAN 05/01/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: BOWERS, RICHARD Name: MORGAN, SAMUEL

 Address:
 1937 SW HENDRY ST
 Address:
 3048 SE BROWN ROAD

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:
 ARCADIA, FL 34266

Title: T ( ) Delete Title: S (X) Change ( ) Addition Name: GILCHRIST, VALERIE P Name: GILCHRIST, VALERIE

 Name:
 Glechtist, Valente
 Name:
 Glechtist, Valente

 Address:
 1277 SE FIRST AVE
 Address:
 1277 SE FIRST AVE

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:
 ARCADIA, FL 34266

Title: D () Delete Title: D (X) Change () Addition
Name: MORGAN, SAMUEL Name: WHITLOCK, JACQULLA

Name:MORGAN, SAMUELName:WHITLOCK, JACQULLAddress:3048 SE BROWN ROADAddress:34 COURT STREETCity-St-Zip:ARCADIA, FL 34266City-St-Zip:ARCADIA, FL 34266

 $\label{eq:time_def} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf T} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 BYNES, BETTY
 Name:
 BYNES, BETTY

 Address:
 1017 SW HENRY ST
 Address:
 1017 SW HENRY ST

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:
 ARCADIA, FL 34266

Title: D () Delete Title: () Change () Addition

 Name:
 DAWKINS, CYNTHIA
 Name:

 Address:
 321 SINGLETON AVE
 Address:

 City-St-Zip:
 ARCADIA, FL 34266
 City-St-Zip:

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

Name:CLIFTON, DEBORAHName:WILLIAMS, FAYEAddress:1128 SW GOLDEN AVENUEAddress:1473 SW HARLEM CIRCLECity-St-Zip:ARCADIA, FL 34266City-St-Zip:ARCADIA, FL 34266

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: VALERIE GILCHRIST S/D 05/01/2009

Electronic Signature of Signing Officer or Director

Date