

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006391

**FILED**  
**May 18, 2012**  
**Secretary of State**

**Entity Name:** DE SOTO COUNTY COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

3048 SE BROWN ROAD  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

3048 SE BROWN ROAD  
ARCADIA, FL 34266

**New Mailing Address:**

**FEI Number:** 75-3217651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAUL BENNETT SEUSY, P.A.  
203 WEST OAK STREET  
ARCADIA, FL 34266 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  
**Name:** MORGAN, SAMUEL  
**Address:** 3048 SE BROWN ROAD  
**City-St-Zip:** ARCADIA, FL 34266

**Title:** D  
**Name:** DAWKINS, CYNTHIA  
**Address:** 321 SINGLETON AVE  
**City-St-Zip:** ARCADIA, FL 34266

**Title:** D  
**Name:** WHITLOCK, JACQUILLIA  
**Address:** 34 COURT STREET  
**City-St-Zip:** ARCADIA, FL 34266

**Title:** T  
**Name:** BYNES, BETTY  
**Address:** 1017 SW HENRY ST  
**City-St-Zip:** ARCADIA, FL 34266

I hereby 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 all other like empowered.

**SIGNATURE:** BETTY BYNES

T

05/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date