

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000012228

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

**Entity Name:** RESURRECT OUR NEIGHBORHOOD NOW, INC.

**Current Principal Place of Business:**

450 POWERLINE ROAD  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

450 NORTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

450 POWERLINE ROAD  
POMPANO BEACH, FL 33069

**New Mailing Address:**

450 NORTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**FEI Number:** 75-3265405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LAWRENCE A CAPLAN, P.A.  
1900 CORPORATE BLVD SUITE 400 E  
BOCA RATON, FL 33431 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: D  
Name: DOZIER, O'NEAL REV.  
Address: 450 NORTH POWERLINE ROAD  
City-St-Zip: POMPAN0 BEACH, FL 33069

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: REV. O'NEAL DOZIER

D

03/11/2010

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

\_\_\_\_\_  
Date