2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004023

FILED Sep 03, 2009 Secretary of State

Entity Name: FAMILY LIFE COMMUNITY DEVELOPMENT CORPORATION, INC.

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

1253 S.W. SAN ESTEBAN AVE 1253 S.W. SAN ESTEBAN AVE PORT SAINT LUCIE, FL 34953

SUITE BOX 1

PORT SAINT LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

1253 S.W. SAN ESTEBAN AVE P.O. BOX 880093

PORT SAINT LUCIE, FL 34953 PORT SAINT LUCIE, FL 34984

FEI Number: 80-0293958 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:

GAYLE, DARREN D GAYLE, SUZETTE I

1253 S.W. SAN ESTEBAN AVE 1253 S.W. SAN ESTEBAN AVE US PORT SAINT LUCIE, FL 34953 PORT SAINT LUCIE, FL 34953 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: SUZETTE GAYLE 09/03/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

GAYLE, DARREN D GAYLE, SUZETTE I CEO Name: Name:

1253 S.W. SAN ESTEBAN AVE Address: P.O. BOX 880093 Address: City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: PORT SAINT LUCIE, FL 34984

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

GAYLE, SUZETTE I Name: GAYLE, DARREN D Name:

Address: 1253 S.W. SAN ESTEBAN AVE Address: P.O. BOX 880093

City-St-Zip: PORT SAINT LUCIE, FL 34953 City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: () Delete Title: (X) Change () Addition SMITH, BARRY WRIGHT, CHRISTOPHER K Name: Name: 781 S.W. CURRY STREET 1204 SW LIVE OAK COVE Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: () Delete Title: (X) Change () Addition Name: SHANNON, MATTIE R Name: DUNCAN, CHRISTOPHER L 1009 A-3 GREEN PINE BLVD 997 ALTAMIRA STREET Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: PALM BAY, FL 32907 Title: (X) Delete Title: () Change () Addition

CARTER, BYRON Name: Name: 5225 N.W. IREDELL STREET Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip:

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

GERALD, SARAH Name: Name: Address: 2779 S.E. RAWLING ROAD Address: PORT SAINT LUCIE, FL 34983 City-St-Zip: City-St-Zip:

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: SUZETTE I. GAYLE **PRES** 09/03/2009

Electronic Signature of Signing Officer or Director

Date