

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007966

FILED
Apr 15, 2009
Secretary of State

Entity Name: PARTNERSHIP FOR COMMUNITY TRANSFORMATION, INC.

Current Principal Place of Business:

3340 NW 80TH TERRACE
MIAMI, FL 33147

New Principal Place of Business:

777 NW 106TH STREET
MIAMI, FL 33150

Current Mailing Address:

3340 NW 80TH TERRACE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 26-3732580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CADERNO, DELIA MRS.
3340 NW 80TH TERRACE
MIAMI, FL 33147 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: DP () Delete
Name: GARCIA, HECTOR REV.
Address: 15701 SW 137TH CT.
City-St-Zip: MIAMI, FL 33177

Title: DVP () Delete
Name: BATTLE, MIA MRS.
Address: 15245 SW 45TH TERRACE
City-St-Zip: MIAMI, FL 33185

Title: DS () Delete
Name: TROTTER, LYNN MISS.
Address: 8925 SW 40TH TERRACE
City-St-Zip: MIAMI, FL 33165

Title: DT () Delete
Name: FERNANDEZ, MYRIAM MRS.
Address: 120 NW 65TH COURT
City-St-Zip: MIAMI, FL 33126

Title: D (X) Delete
Name: CADERNO, DELIA MRS.
Address: 3340 NW 80TH TERRACE
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GARCIA, HECTOR REV.
Address: 18322 SW 142 COURT
City-St-Zip: MIAMI, FL 33177

Title: DVP (X) Change () Addition
Name: BATTLE, MIA
Address: 15245 SW 45TH TERRACE
City-St-Zip: MIAMI, FL 33185

Title: DS (X) Change () Addition
Name: TROTTER, LYNN
Address: 8925 SW 40TH TERRACE
City-St-Zip: MIAMI, FL 33165

Title: DT (X) Change () Addition
Name: FERNANDEZ, MYRIAM
Address: 120 NW 65TH COURT
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
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: HECTOR GARCIA

P

04/15/2009

Electronic Signature of Signing Officer or Director

Date