

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

DOCUMENT# N08000011617

**FILED**  
**May 02, 2012**  
**Secretary of State**

**Entity Name:** COMMUNITY WORKS COALITION INC.

**Current Principal Place of Business:**

10664 SW 186TH STREET  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

10664 SW 186TH STREET  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 26-3959619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COAKLEY, ANDRE  
10664 SW 186TH STREET  
MIAMI, FL 33157 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:** PRES  
**Name:** COAKLEY, ANDRE  
**Address:** 10134 SW 223 TERRACE  
**City-St-Zip:** MIAMI, FL 33190

**Title:** VP  
**Name:** BOWEN, JOHN  
**Address:** 5793 SW 59TH STREET  
**City-St-Zip:** MIAMI, FL 33143

**Title:** VP  
**Name:** WILLIAMS, TREVOR  
**Address:** 10134 SW 223 TERRACE  
**City-St-Zip:** MIAMI, FL 33190

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:** ANDRE COAKEY

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05/02/2012

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

\_\_\_\_\_  
Date