

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006296

FILED  
Feb 21, 2012  
Secretary of State

**Entity Name:** ALLAPATTAH COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

4111 NW 17 AVENUE  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

4111 NW 17 AVENUE  
MIAMI, FL 33142

**New Mailing Address:**

**FEI Number:** 27-2961872

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HOUSE OF GOD MIRACLES REVIVAL FELLOWSHIP  
4111 NW 17TH AVENUE  
MIAMI, FL 33142 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, P  
Name: MORRIS, ULYSSES S JR.  
Address: 11421 SW 203 TERRACE  
City-St-Zip: MIAMI, FL 33189

Title: D,VP  
Name: MCFARLAND, CARL  
Address: 6472 BUCHANNAN STREET  
City-St-Zip: HOLLYWOOD, FL 33024

Title: D, T  
Name: FLOWERS, MARY L  
Address: 2990 NW 65 AVENUE  
City-St-Zip: MIAMI, FL 33147

Title: D, S  
Name: EVERETT, BETTY  
Address: 5831 SW 58 TERR.  
City-St-Zip: MIAMI, FL 33143 US

Title: D  
Name: MCINTYRE, VINCENT  
Address: 2038 NW 5 PLACE  
City-St-Zip: MIAMI, FL 33127

Title: D  
Name: HARRIS, COMPTON  
Address: 1731 NW 135 STREET  
City-St-Zip: MIAMI, FL 33167

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 EVERETT

SEC.

02/21/2012

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

\_\_\_\_\_  
Date