


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N10783	
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FILED
Sep 05, 2008 08:00 AM
Secretary of State

Principal Place of Business 196 SE JAME AVE. LAKE CITY, FL 32025 US	Mailing Address POST OFFICE BOX 10 P.O. BOX 10 LAKE CITY, FL 32056-0010 US
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07142008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2444446	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MORGAN, DENWARD 2205 SW MAYO RD LAKE CITY, FL 32024
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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

**Filing Fee is \$61.25
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PCD
NAME	MORGAN, DENWARD
STREET ADDRESS	2205 SW MAYO RD
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	VCD
NAME	PETTY, ZIMMIE
STREET ADDRESS	946 SW CANNON CREEK RD
CITY-ST-ZIP	LAKE CITY, FL 32024
TITLE	SD
NAME	BUNDY, IRIS P
STREET ADDRESS	934 NW INDIAN SHORE DR
CITY-ST-ZIP	LAKE CITY, FL 32055
TITLE	TD
NAME	SAUNDERS, CONSTANCE S
STREET ADDRESS	328 SE DEERWOOD GLENN
CITY-ST-ZIP	LAKE CITY, FL 32025
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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09/05/08-80002-015 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Denward Morgan DENWARD MORGAN 8-31-08 752-1737
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #