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2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N33281					
1. Entity Name NORTHWEST COMMUNITIES DEVELOPMENT PARTNERSHIP, INC.					
Principal Place of Business 638 SOUTH STREET WEST PALM BEACH, FL 33401 US			Mailing Address 638 SOUTH STREET WEST PALM BEACH, FL 33401 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 85-0132483			Applied For Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MCCRAY, TONY R JR. 638 SOUTH STREET WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent National Registered Agents, Inc. Street Address (P.O. Box Number is Not Acceptable) 526 East Park Ave. City Tallahassee FL Zip Code 32301		
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 <i>Melvin Gulp, Asst. Sec.</i>			DATE 6.4.03		
9. Election Campaign Financing Trust Fund Contribution ☐			\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
PO	MCCRAY, TONY R	7301/2 63TH STREET	WEST PALM BEACH, FL 33407	PD	Cassandra Kinsey-Scott
					715 Douglas Ave. W.P.B., FL 33401
SD	GIBSON, DAVID	4200 COMMUNITY DRIVE, WEST	WEST PALM BEACH, FL 33409	TD	David Gibson
					4200 Community Dr. #607
					W.P.B., FL 33409
CD	RICHARDSON, STANLEY	299-1 PRESSWICK CIRCLE	PALM BEACH GARDENS, FL 33418	CD	Stan Richardson
					777 S. Floyler 800W
					W.P.B., FL 33401
				SD	Cliff McRary
					827 Second Street
					W.P.B., FL 33401
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 as changed, or on an attachment with an address, with all other the empowered.					
SIGNATURE: <i>Stan Richardson</i>			Chairman of the Board 6/4/03		

7/6/10