## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N41209

FILED Jan 11, 2006 Secretary of State

Entity Name: COMMUNITY FINANCING CONSORTIUM, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1016 NORTH DIXIE HWY 2ND FLOOR WEST PALM BEACH, FL 33401 US **New Mailing Address: Current Mailing Address:** 1016 NORTH DIXIE HWY 2ND FLOOR WEST PALM BEACH, FL 33401 US FEI Number: 65-0246414 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GADSON, WANDA 1016 NORTH DIXIE HWY 2ND FLOOR WEST PALM BEACH, FL 33401 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition BOVA, JOE BOVA, JOE Name: Name: 218 DATURA STREET Address: 205 DATURA STREET Address: City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401 Title: Title: (X) Change ( ) Addition ( ) Delete PETERSON, MARK Name: PETERSON, MARK Name: Address: ONE FINANCIAL PLAZA 9TH FLR Address: 401 EAST LAS OLAS BLVD., 8TH FLOOR City-St-Zip: FT. LAUDERDALE, FL 33394 City-St-Zip: FT. LAUDERDALE, FL 33301 Title: () Delete Title: () Change () Addition MOLNAR, CAROL Name: Name: 1800 CORPORATE BLVD NW 2ND FLOOR Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: Title: ( ) Delete Title: ST (X) Change ( ) Addition Name: BOLLINGER, MIKE Name: TETRICK, TED 3980 RCA BLVD STE 8012 Address: 3980 RCA BLVD STE 8012 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: (X) Delete Title: () Change () Addition ARBOGAST, STEVE Name: Name: 301 YAMATO RD Address: Address: BOCA RATON, FL 33431 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: WANDA GADSON E.D. 01/11/2006