

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41209

FILED
Mar 05, 2009
Secretary of State

Entity Name: COMMUNITY FINANCING CONSORTIUM, INC.

Current Principal Place of Business:

2110 NORTH FLORIDA MANGO ROAD
SUITE 200
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

Current Mailing Address:

2110 NORTH FLORIDA MANGO ROAD
SUITE 200
WEST PALM BEACH, FL 33409 US

New Mailing Address:

P. O. BOX 107
WEST PALM BEACH, FL 33402 US

FEI Number: 65-0246414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GADSON, WANDA
2110 NORTH FLORIDA MANGO ROAD
SUITE 200
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

GADSON, WANDA G
145 NW 10TH AVENUE
DELRAY BEACH, FL 33444 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: WANDA G GADSON

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: WALDRON, DONNA
Address: 205 DATURA STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ST () Delete
Name: PETERSON, MARK
Address: 401 EAST LAS OLAS BLVD., 8TH FLOOR
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: C () Delete
Name: TETRICK, TED
Address: 3910 RCA BLVD STE 1001
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 G. GADSON

EX D

03/05/2009

Electronic Signature of Signing Officer or Director

Date