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

DOCUMENT # N41209

1. Entity Name

COMMUNITY FINANCING CONSORTHING INC.



FILED Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90161 042 ****70.00

		11014, 1110.					
1016 NORTH DIXIE HWY 2ND FLOOR WEST PALM BEACH FL 33401 WI		2ND FLOOR	1016 North dixie hwy 2nd floor West Palm Beach fl 33401		TOLINGIO NON ZONO IZNI BIZNI BIZNI BIZNI BIZNI	#	
2. Principal Place of Business		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 65-0246414 Applied For		
Zip Country		Zip	Zip Country			Not Applicable 5 Additional	
	6. Name and Address of Curre	nt Registered Agent		5. Certificate of Sta	atus Desired Fee R	lequired	
1016 NO 2ND FLO WEST P	ON, LYNN ORTH DIXIE HWY OOR PALM BEACH FL 33401 The named entity submits this statement attions of registered agent.	for the purpose of changin	Street Addres	SEPO, Box Number is N. Dixie H.	or Acceptable) , 279	Code 33401 with, and accept	
	Signature, typed or printed name of registered age FILE NOW: FEE IS \$61.25	9. Election	(NOTE: Registered Agent signature requi	\$5.00 May Be Added to Fees	Make Check Paya Florida Department		
0.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTO	RS IN 10	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	WEST PALM BEACH FL 33401	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Ch		
ITLE IAME TREET ADDRESS ITY-ST-ZIP	D PETERSON, MARK ONE FINANCIAL PLAZA 9TH FL FT. LAUDERDALE FL 33394	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Cha	ange Addition	
TLE AME TREET ADDRESS TY-ST-ZIP	P ARENS, ERIK 350 ROYAL PALM WAY PALM BEACH FL 33480	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Cha	ange Addition	
TLE AME TREET ADDRESS TY-ST-ZIP	V MCDOUGAL, DEXTER 8750 DORAL BLVD 7P MIAMI FL 33178-2402	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Cha	inge	
ile Ime Reet address IY-ST-ZIP	ST ARBOGAST, STEVE 301 YAMATO RD BOCA RATON FL 33431	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Cha	nge Addition	
TLE AME REET ADDRESS TY-ST-ZIP	pertify that the information supplied with	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Chai	_	

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 SIGNATURE: A MANDE BOOKECH AND Gadson 2/14/03 541-833-8503