8/5/2002-90009-019-$61.25-$61.25

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

FILED

02 OCT 24 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted] 43458

DOCUMENT # N95000000936 ✓

1. Entity Name

Concerned Citizens for Community Improvement, of Pahokee, Inc.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
800 Palm Blvd	P.O. BOX 509
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pahokee, FL 33476	City & State: Pahokee, FL 33476
Zip / Country	Zip / Country

4. FEI Number ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Mary C. Wright

Street Address (P.O. Box Number is Not Acceptable): 800 Palm Blvd

P.O. Box 509

City: Pahokee FL Zip Code: 33476

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.

SIGNATURE: Mary C. Wright — Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) — DATE: May 01, 02

FEE IS $61.25 Initial or Amended UBR

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Mary C. Wright D
STREET ADDRESS	800 Palm Blvd
CITY-ST-ZIP	Pahokee, FL 33476
TITLE	Vice President
NAME	Delores Maxey D
STREET ADDRESS	891 Palm Blvd
CITY-ST-ZIP	Pahokee, FL 33476
TITLE	Secretary D
NAME	Mary S. Jackson
STREET ADDRESS	230 W. 5th Street
CITY-ST-ZIP	Pahokee, FL 33476
TITLE	Treasurer D
NAME	Angeline Folston
STREET ADDRESS	505 Baines Terrace
CITY-ST-ZIP	Pahokee, FL 33476
TITLE	
NAME	
STREET ADDRESS	All addresses are the same
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Mary C. Wright — May 01, 2002 — 561/924-8217

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

11/25/02

The Concerned Citizen For
Improvement
P.O. Box 509
Pahokee, Fl 33476

WEST PALM BEACH, FL
PM
OCT 2001

37 USA

Florida Department of State
Jim Smith
Secretary of State
Division of Corporations
Corporation Records
P.O. Box 6327
Tallahassee, Fl 32314-6327