

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 28, 2004
Secretary of State**

DOCUMENT# N95000005607

Entity Name: COMMUNITY INCLUSION ENTERPRISES, INC.

Current Principal Place of Business:

3459 DEPEW AVE.
PT. CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

3459 DEPEW AVE
PT. CHARLOTTE, FL 33952 US

New Mailing Address:

FEI Number: 65-0624568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAYLOR, DONNA V
8330 ALAN BLVD
PORT CHARLOTTE, FL 33982

Name and Address of New Registered Agent:

TAYLOR, DONNA V
P.O. BOX 495595
PORT CHARLOTTE, FL 33949

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: _____ Date: 03/28/2004
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TAYLOR, DONNA V
Address: 8330 ALAN BLVD
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: HAROLD, LEWIS
Address: 3347 N.E. APPALOOSA ST.
City-St-Zip: ARCADIA, FL 33821

Title: D () Delete
Name: GORDON, KELLI C
Address: 8330 ALAN BLVD
City-St-Zip: PUNTA GORDA, FL 33982

Title: D () Delete
Name: HOST, KAARE
Address: 21028 EXMORE AVE.
City-St-Zip: PT. CHARLOTTE, FL 33952

Title: D () Delete
Name: NELSON, CAROL
Address: 20103 VENTURA AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

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:

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 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 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: DONNA V. TAYLOR D 03/28/2004
Electronic Signature of Signing Officer or Director Date