


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90205 030 ****61.25

DOCUMENT # N96000001617

1. Entity Name
 THE ERITREAN COMMUNITY OF CENTRAL FLORIDA, INC.



Principal Place of Business
 7857 ELMSTONE CIRCLE
 ATTN: FANIEL GHEBREHIWET
 ORLANDO, FL 32822 US

Mailing Address
 7857 ELMSTONE CIRCLE
 ATTN: FANIEL GHEBREHIWET
 ORLANDO, FL 32822 US

40055695



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04142006 Chg-NP CR2E037 (11/05)

City & State

4. FEI Number
 59-3374019

Applied For
 Not Applicable

Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GHEBREHIWET, FANIEL
 7857 ELMSTONE CIRCLE
 ORLANDO, FL 32822

7. Name and Address of New Registered Agent

Name **BERHANE D. GEBREMEDHIN**

Street Address (P.O. Box Number is Not Acceptable)
~~4513 OAK HEAVEN DR. APT# 305~~

City **ORLANDO,** FL Zip Code **32839**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME GHEBREHIWET, FANIEL
 STREET ADDRESS 521 ELVEDADO AVENUE
 CITY-ST-ZIP ORLANDO, FL 32807

TITLE **GHEBREHIWET FANIEL PD** Change Addition
 NAME **GHEBREHIWET FANIEL PD**
 STREET ADDRESS **7857 ELMSTONE CIR.** ADDRESS CHANGE
 CITY-ST-ZIP **ORLANDO, FL 32822**

TITLE D
 NAME WOLDEGABER, SANSON
 STREET ADDRESS 1445 MON THEATH CIR.
 CITY-ST-ZIP OCOEE, FL 34761

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D
 NAME HAGOS, DEHAB
 STREET ADDRESS 12114 ROMERO STREET
 CITY-ST-ZIP ORLANDO, FL 32837

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Faniel Ghebrehiwet
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/06 407-267-1199
 Date Daytime Phone #