2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001940

Entity Name: COMEUNITY, INC.

FILED May 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 705 BLAKE AVENUE **BUILDING H** COCOA, FL 32922 **New Mailing Address: Current Mailing Address:** 705 BLAKE AVENUE BUILDING H COCOA, FL 32922 US FEI Number: 59-3380450 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPAULDING, EARTHY SPAULDING, E 705 BLAKE AVENUE 705 BLAKE AVENUE COCOA, FL 32922 COCOA, FL 32922 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: E. SPAULDING 05/02/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SPAULDING, EARTHY SPAULDING, E Name: Name: 705 BLAKE AVENUE Address: 705 BLAKE AVENUE Address: City-St-Zip: COCOA, FL 32922 City-St-Zip: COCOA, FL 32922 Title: () Delete Title: () Change () Addition PITTMAN, JOHN Name: Name: Address: 960 BREWSTER LANE Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: () Change () Addition ROBERTS JR., JAMES Name: Name: 1919 FABIEN CIRCLE Address: Address: City-St-Zip: VIERA, FL 32940 City-St-Zip: Title: () Delete Title: () Change () Addition NEELY, C. GARFIELD Name: Name: 1805 HENSLEY DR. Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: (X) Delete Title: () Change () Addition BARBER, DONALD Name: Name: 1770 WINDOVER OAKS #44 Address: Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: Title: (X) Delete Title: () Change () Addition KEELS, WOODROW Name: Name: Address: 1840 CLOVER CIRCLE Address: MELBOURNE, FL 32935 City-St-Zip: 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: E SPAULDING D 05/02/2008