

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001997

FILED
Mar 20, 2008
Secretary of State

Entity Name: UNITED COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

1950 LEE ROAD
208
WINTER PARK, FL 327891859

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 991
WINTER PARK, FL 327900991

New Mailing Address:

FEI Number: 59-3380885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSTON, THOMAS N
1950 LEE ROAD
208
WINTER PARK, FL 327891859 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALSTON, THOMAS N
Address: 1544 CROSSBEAM DRIVE
City-St-Zip: CASSELBERRY, FL 327075926

Title: CD () Delete
Name: THOMAS, KENNETH L
Address: 3527 LAUGHLIN ROAD
City-St-Zip: ZELLWOOD, FL 327985305

Title: TD (X) Delete
Name: CHANDLER, DYANNE L
Address: 1402 BARBADOS AVENUE
City-St-Zip: ORLANDO, FL 328255722

Title: SD () Delete
Name: BARON, JOSEPH N
Address: 1730 K STREET NW
City-St-Zip: WASHINGTON, DC 200063801

Title: D () Delete
Name: COTTINGHAM, WINTHROP E
Address: 1475 LEXINGTON PARKWAY
City-St-Zip: APOPKA, FL 327122695

Title: D (X) Delete
Name: TAYLOR, MARLENA D
Address: 5302 CHAMPAGNE CIRCLE
City-St-Zip: ORLANDO, FL 328082859

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: ALSTON, THOMAS N
Address: 1544 CROSSBEAM DRIVE
City-St-Zip: CASSELBERRY, FL 327075926

Title: D (X) Change () Addition
Name: THOMAS, KENNETH L
Address: 3527 LAUGHLIN ROAD
City-St-Zip: ZELLWOOD, FL 327985305

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CPD (X) Change () Addition
Name: COTTINGHAM, WINTHROP E
Address: 1475 LEXINGTON PARKWAY
City-St-Zip: APOPKA, FL 327122695

Title: () Change () Addition
Name:
Address:
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: THOMAS N. ALSTON

TD

03/20/2008

Electronic Signature of Signing Officer or Director

Date