2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002302

FILED Aug 18, 2009 Secretary of State

Entity Name: GREATER COCOA COMMUNITY PARTNERSHIP, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	NNOY AVE FL 32922 US		
Current Mailing Address:		New Mailing Address:	
P.O. BOX COCOA, F	246 FL 32923 US		
n accordar	r: 59-3392795 FEI Number Applied For() FEI I nce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:		
96 WILLAI SUITE 302	THERIAC, P.A. RD STREET 2 FL 32922 US		
	e named entity submits this statement for the purpos e of Florida.	e of changing	its registered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTOR
Fitle: Name: Nddress: City-St-Zip:	P () Delete CLIFTON, THERESA 2350 RAINTREE LAKE CIRCLE MERRITT ISLAND, FL 32952 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	ST () Delete YOUNGBLOOD, JOANNE 430 DELANNOY AVE COCOA, FL 32922 US	Title: Name: Address: City-St-Zip:	VP (X) Change () Addition RUSSO, MONICA 430 DELANNOY AVE COCOA, FL 32922 US
Γitle: Name:	V () Delete GAYLOR, VIRGINIA 225 ST RD 520 E COCOA, FL 32922 US	Title: Name: Address: City-St-Zip:	S (X) Change () Addition GAYLOR, VIRGINIA 225 ST RD 520 E COCOA, FL 32922 US
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip:	D () Delete WRIGHT, IDA 430 DELANNOY AVE COCOA, FL 32922	Title: Name: Address: City-St-Zip:	T (X) Change () Addition DOBRIN, CONNIE 430 DELANNOY AVE COCOA, FL 32922
City-St-Zip: Fitle: Name: Address:	WRIGHT, IDA 430 DELANNOY AVE	Name: Address:	DOBRIN, CONNIE 430 DELANNOY AVE

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: JOANNE N YOUNGBLOOD D 08/18/2009