

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000003641

FILED
Mar 23, 2006
Secretary of State

Entity Name: COMMUNITY ALLIANCE DEVELOPMENT CORPORATION, INCORPORATED

Current Principal Place of Business:

1415 N. MYRTLE AVE
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2307
JACKSONVILLE, FL 322032307 US

New Mailing Address:

P.O. BOX 40845
JACKSONVILLE, FL 32203 US

FEI Number: 59-3402902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARRIS, LEE E
1319 N. MYRTLE AVENUE
JACKSONVILLE, FL 32209 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: LEE E. HARRIS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CH () Delete
Name: HARRIS, LEE E PASTOR
Address: 1319 N. MYRTLE AVENUE
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: GEE, BIRNETT
Address: 2564 MINOSA CIR. W.
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: STANLEY, ROBINSON
Address: 1319 N. MYRTLE AVENUE
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: NESBITT, SAMUEL P BISHOP
Address: 1241 N. 9TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: WILLIAMS-BEY, HALLIE
Address: 903 W. UNION ST
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: MORGAN, JACKIE
Address: 1336 N. MYRTLE AVE
City-St-Zip: JACKSONVILLE, FL 32209

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: D (X) Change () Addition
Name: HARRIS, BETTY V
Address: 1262 W. 4TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

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 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: LEE E. HARRIS

CH

03/23/2006

Electronic Signature of Signing Officer or Director

Date