## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000003764

FILED Sep 06, 2006 Secretary of State

Entity Name: CENTURION COMMUNITY DEVELOPMENT CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

4015 N.W. 17TH AVENUE MIAMI, FL 33142

Current Mailing Address: New Mailing Address:

P.O. BOX 420026 4015 NW 17 AVE MIAMI, FL 33142 MIAMI, FL 33142

FEI Number: 65-0681687 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:

BEMBRY, ORLANDO SONJA, CARTER
1601 NW 52ND STREET 1601 NW 52ND STREET
MIAMI, FL 33142 US MIAMI, FL 33142 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: SONJA CARTER 09/06/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CEO () Delete
 Title:
 CEO (X) Change () Addition

 Name:
 BEMBRY, ORLANDO
 Name:
 CARTER, SONJA

 Address:
 1601 NW 52ND STREET
 Address:
 1601 NW 52ND STREET

City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete Title: (X) Change ( ) Addition BEMBRY, SONJA Name: Name: CARTER, SONJA Address: 1601 NW 52ND ST Address: 1601 NW 52ND ST City-St-Zip: MIAMI, FL 33142 City-St-Zip: MIAMI, FL 33142

Title: VPT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SHEFTAL, DARRELL
 Name:

 Address:
 4015 NW 17 AVE
 Address:

 City-St-Zip:
 MIAMI, FL 33142
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ABLES, ROBIN
 Name:

 Address:
 4015 N.W. 17TH AVE.
 Address:

 City-St-Zip:
 MIAMI, FL 33142
 City-St-Zip:

Title: T ( ) Delete Title: T (X) Change ( ) Addition

 Name:
 MILLS, CELESTINE
 Name:
 ABLES, MICHAEL

 Address:
 4015 NW 17TH AVENUE
 Address:
 4015 NW 17TH AVENUE

 City-St-Zip:
 MIAMI, FL 33142
 City-St-Zip:
 MIAMI, FL 33142

Title: T (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ABLES, MICHAEL
 Name:

 Address:
 4051 NW 17TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33142
 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: SONJA CARTER CEO 09/06/2006