2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2009
Secretary of State

DOCUMENT# N96000004252

Entity Name: ALLEN COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

732 ORANGE AVE
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 9717
DAYTONA BEACH, FL 321209717 US

New Mailing Address:

FEI Number: 59-3434587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CUBY, LESTER J
7 FOX HOLLOW DR.
ORMOND BEACH, FL 32174 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: S ( ) Delete
Name: SLATER, DONNELL
Address: 1061 BERKSHIRE ROAD
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D ( ) Delete
Name: JOHNSON, TERESA R
Address: 120 LAUREL VALLEY G.
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D ( ) Delete
Name: MCCRARY, EARL III
Address: 133 CORAL CIRCLE
City-St-Zip: PORT ORANGE, FL 32119

Title: D ( ) Delete
Name: DAVIS, RUDEAN
Address: 868 MAGNOLIA AVE.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete
Name: MUGALA, NATHAN M
Address: 320 N. LINCOLN STREET
City-St-Zip: DAYTONA BEACH, FL 32114

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: ( ) 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 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: TERESA JOHNSON D 04/11/2009

Electronic Signature of Signing Officer or Director — Date