2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004411

FILED Jan 26, 2009 Secretary of State

Entity Name: BRADLEY COMMUNITY PROJECT, INC.

US

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

125 HOOKER STREET BRADLEY, FL 33835

Current Mailing Address: New Mailing Address:

P O BOX 289 BRADLEY, FL 33835

FEI Number: 59-3045320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, FRANKIE 6937 CENTRAL AVE BRADLEY, FL 33835

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FRANKIE SMITH,
 Name:
 FRANKIE SMITH,

 Address:
 6937 CENTRAL AVE
 Address:
 6937 CENTRAL AVE

 City-St-Zip:
 BRADLEY, FL
 33835 US

Title: VPD () Delete Title: VPD (X) Change () Addition Name: LEROY SIMS, Name: LEROY SIMS,

Address: 6851 BURNETT ST Address: 6851 BURNETT ST
City-St-Zip: BRADLEY, FL City-St-Zip: BRADLEY, FL 33835 US

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

 Name:
 MATHIS, SHARON
 Name:
 MATHIS, SHARON

 Address:
 6535 EAST ST
 Address:
 6535 EAST ST

City-St-Zip: BRADLEY, FL 33835 City-St-Zip: BRADLEY, FL 33835 US

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

 Name:
 LEONA ELLISON,
 Name:
 LEONA ELLISON,

 Address:
 6953 HOLLY DR
 Address:
 6953 HOLLY DR

 City-St-Zip:
 BRADLEY, FL
 City-St-Zip:
 BRADLEY, FL
 33835 US

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: FRANKIE L. SMITH PD 01/26/2009