

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90024 046 ****70.00

DOCUMENT # N96000005756

1. Entity Name

F.E.C.D. COMMUNITY DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

**800 VIRGINIA AVE
 STE 23-E
 FT. PIERCE FL 34982
 US**

**800 VIRGINIA AVE
 STE 23-E
 FT. PIERCE FL 34982-5888
 US**

819755



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0704757

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HOGAN, DAVE JR.
 800 VIRGINIA AVENUE
 SUITE 23-C
 FT. PIERCE FL 34984**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

[Signature of Dave Hogan]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02-20-00

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	HOGAN, DAVE JR.	
STREET ADDRESS	301 ESSEX DRIVE	
CITY-ST-ZIP	FT. PIERCE FL 34982	
TITLE	BM	<input type="checkbox"/> Delete
NAME	ROBERTS, CLEVELAND E JR.	
STREET ADDRESS	1540 N.W. 203RD STREET	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE	TD	<input type="checkbox"/> Delete
NAME	GUY, FELIX E	
STREET ADDRESS	1480 WEST 29TH STREET	
CITY-ST-ZIP	RIVIERA BEACH FL 33404	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, WOODROE SR.	
STREET ADDRESS	3420 S.W. 1ST COURT	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	
TITLE	S	<input type="checkbox"/> Delete
NAME	BRAZIL, ELVIS	
STREET ADDRESS	14531 NW 13TH CT	
CITY-ST-ZIP	MIAMI FL 33247	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature of E. Guy]

02-20-00 (561)848-7332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR