## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

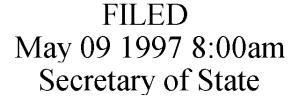
Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #
1. Corporation Name

N96000006186 (8)

ST JAMES COMMUNITY DEVELOPMENT, INC.





Principal Place of Business Mailing Address							
500 N.W. 21ST		O N.W. 21ST AVENUE	_				
POMPANO BEACH FL 33069			POMPANO BEACH FL 33069-2723				
							3. Date Incorporated or Qualified   3a. Date of Last Report   12/02/1996
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			26				(65-0708868 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5 Certificate of Status Desired \$8.75 Additional
City & State			City & State				Feé Required
23			<b>-</b>				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Zip Country Zip			Country			8. This corporation has liability for intangible tax under s. 199.032,
24	25	29		30	,		Florida Statutes Yes No
9. Name and Address of Current Region							10. Name and Address of New Registered Agent
					81	Name	
WILSON		82 Street Add			Address (P.O. Box Number is Not Acceptable)		
500 N.W. 21ST AVNUE							
POMPANO BEACH FL 33089					83		
					84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617 0502	and f	317 1508 Florida Stetut	es the a	bove	n-pamed	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating)  DA15							
12.	Signature, typed or printed hame of registered agen OFFICERS AND			Hegisjere	o Age	nt signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	251712	☐ DELETE	1.1 11	TLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Y/ew member  WALLACE D1995  Change Daddition
NAME	WILSON, BOOKER T			12 N	AME		おおにんじゃ レバカン
STREET ADDRESS	2119 N.W. 2ND ST			1,3 \$	TREET	ADDRESS	15/ N.W. XY YUZ
CITY-ST-ZIP	POMPANO BEACH FL 33069			1.4 0	ITY-S	1- ZIP	FOMPAND BCH. FLA 33069 18
TITLE	SD SD		☐ DELETE	2.1 Ti	TLE		New Membel Change Addition
NAME	PICKETT, GENEVA E			2.2 N	AME		Louise Hodges 2210 NW 45 st
STREET ADDRESS	2119 N.W. 2ND ST			235	TREET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33069					ST- <b>2</b> IP	Pompano Bet Ft 33041 New member Change Maddilion
TITLE	TD		DELETE	3.1 TITLE			New member Change Addition
NAME	WILSON, ESSIE M			3.2 N			Mozell Sheppard
STREET ADDRESS	2119 N.W. 2ND ST						2151 NW 109 CF
CITY-ST-ZIP	POMPANO BEACH FL 33069		☐ DELETE	3,4. C 4.1 Tu		ST-ZIP	Pompano Bek FL 33064
TITLE	cinous Diens		☐ DELETE				New member
NAME	SADIE DIGGS 1181 N.W. 24 AVE			4.21			alan amazelo de
	Daniel Act Fr	23	W. A	1		ADDRESS	For Landerdale F/ 3831/
CITY-ST-ZIP TITLE	pompano Bch FC	200	DELETE	4.4 CI 5.1 TI		1-2IP	Change Addition
			Delete				Citalige C Addition
NAME STREET ANDRESS				52 N		ADDRESS	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP TITLE	14		DELETE	6.1 TI		T-ZIP	Change Addition
NAME				62 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP						1-ZIP	
	ov certify that the information supplied	with t	his filing does not quali				lated in Section 119 07(3)(i). Florida Statutes. Lighther certify that the

I do noted you may meet the information supplied with this hing doos not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.