

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2006**  
**Secretary of State**

DOCUMENT# N96000006186

Entity Name: ST JAMES COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business:**

500 N.W. 21ST AVENUE  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

6920 NW 44TH COURT  
LAUDERHILL, FL 33319

**New Mailing Address:**

FEI Number: 65-0708868      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HOWARD, WYLIE L SR  
6920 NW 44TH COURT  
LAUDERHILL, FL 33319      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: PD      ( ) Delete  
Name: HOWARD, WYLIE L SR  
Address: 6920 N.W 44TH CRT  
City-St-Zip: LAUDERHILL, FL 33319

Title: D      ( ) Delete  
Name: STUBBS, WILLIE  
Address: 7410 NW 41TH COURT  
City-St-Zip: LAUDERHILL, FL 33319

Title: SD      ( ) Delete  
Name: SHEPPARD, MOZELLE  
Address: 500 NW 21 AVENUE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: S      ( ) Delete  
Name: PACK, TORRANCE  
Address: 449 SW 15 STREET  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D      ( ) Delete  
Name: DIGGS, WALLACE D  
Address: 1151N, W 24TH AVE  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D      ( ) Delete  
Name: SEARCEY, ALAN  
Address: 1711 MLK BLVD  
City-St-Zip: POMPANO, FL 33069

**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:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: WYLIE L. HOWARD, SR.

PD

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date