

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000130

FILED
Apr 21, 2004
Secretary of State

Entity Name: SHILOH COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

1350 NW 95 ST
MIAMI, FL

New Principal Place of Business:

Current Mailing Address:

1350 NW 95 ST
MIAMI, FL

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, EDWARD
1350 NW 95TH STREET
MIAMI, FL 33147 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: EXD () Delete
Name: BENNETT, REV. RICHARD JR
Address: 1350 NW 95 ST
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: ROUNDTREE, CLARA
Address: 1358 NW 96TH STREET
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: HAMILTON, PHILLIP
Address: 1350 NW 95 ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: LOVETT, BRENDA
Address: 6711 NW 29TH AVE
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: MCPHEE, RODERICK
Address: 1400 NW 207TH STREET
City-St-Zip: MIAMI, FL 33169

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 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 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: BRENDA LOVETT

SD

04/21/2004

Electronic Signature of Signing Officer or Director

Date