

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000649

FILED
Apr 25, 2006
Secretary of State

Entity Name: AMETHYST COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

4940 NW 18 ST.
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

4940 NW 18 ST.
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 65-0724145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTHEWS, DOROTHY
4940 NW 18 ST.
LAUDERHILL, FL 33313 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: DP () Delete
Name: MATTHEWS, DOROTHY
Address: 4940 NW 18 ST.
City-St-Zip: LAUDERHILL, FL 33313

Title: DS () Delete
Name: JENKINS, DARLEEN
Address: 5812 BLUEBERRY CT.
City-St-Zip: LAUDERHILL, FL 33313

Title: DT () Delete
Name: GREEN, ANGELA
Address: 1324 NW 4 AVE.
City-St-Zip: FT. LAUDERDALE, FL 33311

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:

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: ANGELA GREEN

DT

04/25/2006

Electronic Signature of Signing Officer or Director

Date