

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

**FILED  
Jan 12, 2006  
Secretary of State**

DOCUMENT# N97000001751

Entity Name: NEIGHBORHOODS UNITED INC.

**Current Principal Place of Business:**

515 S MARYLAND AVE  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

515 S MARYLAND AVE  
PLANT CITY, FL 33563

**New Mailing Address:**

FEI Number: 59-3439157      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MC DONALD, PATRICIA A  
2207 N. MERRIN STREET  
PLANT CITY, FL 33563      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: CD      ( ) Delete  
Name: NETTLES, DOROTHY  
Address: 2318 VILLAGE GREEN BLVD  
City-St-Zip: PLANT CITY, FL 33567

Title: SD      ( ) Delete  
Name: LEWIS, LENNIE  
Address: 1302 EAST LAURA STREET  
City-St-Zip: PLANT CITY, FL 33563

Title: TD      ( ) Delete  
Name: TASBY, CATHERINE  
Address: 1210 EAST RENFRO STREET  
City-St-Zip: PLANT CITY, FL 33563

**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: DOROTHY NETTLES

CD

01/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date