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FILED
Jul 04, 2002 8:00 am
Secretary of State
04-22-2002 90283 028 ****61.25

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002574

1. Entity Name

MEMP DAVIS & ASSOCIATES COMMUNITY DEVELOPMENT CO RPORATION

96494

Principal Place of Business	Mailing Address
3550 NW 95TH TERRACE BLDG S FORT LAUDERDALE FL 33351	3550 NW 95TH TERRACE BLDG S FORT LAUDERDALE FL 33351

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3550 NW 95th Terr	3550 NW 95th Terr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sunrise Florida	City & State: Sunrise, FL
Zip: 33351 Country: US	Zip: 33351 Country: US

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVIS, PATRICIA ANN 9496 NW 39TH ST FORT LAUDERDALE FL 33351	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition
TITLE	P President		TITLE	Patricia A. Davis	
NAME	LITTLE, MARIAN		NAME	P.O. Box 6232	
STREET ADDRESS	1528 47TH AVENUE WEST		STREET ADDRESS	Delray Beach, FL 33482-6232	
CITY-ST-ZIP	BIRMINGHAM AL 35208		CITY-ST-ZIP		
TITLE	D	☑ Delete	TITLE	Gloria Lee	☑ Change ☐ Addition
NAME	JOHNSON, GAIL		NAME	1401 46th St W. (Ens)	
STREET ADDRESS	9102 SCOTT ADAM COURT #258		STREET ADDRESS	Birmingham, AL 35208	
CITY-ST-ZIP	LAUREL MD 20708		CITY-ST-ZIP		
TITLE	D	☑ Delete	TITLE	Kimberly Davis	☑ Change ☐ Addition
NAME	HARRIS, CHRISTOPHER		NAME	3835 39th Ave N.	
STREET ADDRESS	13533 ANNE DALE DRIVE Princedale Dr		STREET ADDRESS	Bitham, AL 35217	
CITY-ST-ZIP	DALE CITY VA 22193		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	DAVIS, FRANCES		NAME		
STREET ADDRESS	1407 46TH ST WEST		STREET ADDRESS		
CITY-ST-ZIP	BIRMINGHAM AL 35208		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	HARRIS, WANDA Princedale		NAME		
STREET ADDRESS	13533 ANNE DALE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	DALE CITY VA 22193		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Patricia A. Davis April 26, 2002 954-747-1422

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #