

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 10 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N97000002865 (0)

1. Corporation Name

IN-TOUCH COMMUNITY DEVELOPMENT, INC.



Principal Place of Business

Mailing Address

2683 N.W. 24TH CT.  
FT. LAUDERDALE FL 33311

2683 N.W. 24TH CT.  
FT. LAUDERDALE FL 33311

3. Date Incorporated or Qualified

05/16/1997

4. FEI Number

65-0754-720

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐

Yes ☐ No

8. This corporation owes or has paid the current year intangible  
Personal Property Tax due June 30.

☐

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TUCKER, MATTIE  
2683 N.W. 24TH CT.  
FT. LAUDERDALE FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME TUCKER, MATTIE  
STREET ADDRESS 2683 N.W. 24TH CT.  
CITY-ST-ZIP FT. LAUDERDALE FL 33311

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE SD  
NAME BALDWIN, HEATH  
STREET ADDRESS 4267 S. SEMERON BLVD.  
CITY-ST-ZIP ORLANDO FL 33311

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE TD  
NAME BALDWIN, LORENZO  
STREET ADDRESS 1923 EAST AVION ST.  
CITY-ST-ZIP ONTARIO CA 91761

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D  
NAME WALTON, LEVONIA  
STREET ADDRESS 2832 N.W. 10TH ST.  
CITY-ST-ZIP POMPANO BEACH FL 33060

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D  
NAME JONES, JEANNIE  
STREET ADDRESS 4970 N.W. 12TH ST.  
CITY-ST-ZIP LAUDERHILL FL 33312

☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D  
NAME FROST, CONNIE  
STREET ADDRESS 3730 N.E. 12TH AVE.  
CITY-ST-ZIP POMPANO BEACH FL 33064

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Mattie Tucker

Mattie Tucker

3-10-98

954-730-7855

CR2E037 (10/97)