2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 AM
Secretary of State

DOCUMENT# N97000004526

Entity Name: NEW VISIONS COMMUNITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

1214 NE FOURTH AVE
FT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1214 NE FOURTH AVE
FT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0798877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GILES, JACQUELYN A
504 NW 20TH AVENUE
FORT LAUDERDALE, FL 33311 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: D ( ) Delete
Name: GLOVER, CLARENCE E
Address: 901 NW ELEVENTH AVE
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: WAGNER, FRANK
Address: 901 NW 11TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: GILES, JACQUELYN
Address: 504 NW 20TH 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 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: CLARENCE E GLOVER D 04/29/2002

Electronic Signature of Signing Officer or Director — Date