

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 25, 2001 08:00 AM**
Secretary of State**DOCUMENT # N97000006058****1. Entity Name**
COMMUNITY UPLIFT PROGRESSIVE DEVELOPMENT CORPORATION

Principal Place of Business 543 S. MARTIN LUTHER KING BLVD. DAYTONA BEACH FL 32114	Mailing Address 543 S. MARTIN LUTHER KING BLVD. DAYTONA BEACH FL 32114
---	---

2. Principal Place of Business 543 ORANGE AVENUE	3. Mailing Address 543 ORANGE AVENUE
--	--

Suite, Apt. #, etc. C	Suite, Apt. #, etc. C
---------------------------------	---------------------------------

City & State DAYTONA BEACH FL	City & State DAYTONA BEACH FL
---	---

Zip 32114	Country	Zip 32114	Country
---------------------	----------------	---------------------	----------------

4. FEI Number 59-3516862	Applied For <input type="checkbox"/> Not Applicable
---	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
--	---------------------------------------

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SHEFFIELD ERNEST F
543 S. MARTIN LUTHER KING BLVD.

DAYTONA BEACH FL 32114 US

7. Name and Address of New Registered Agent

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 reinstalling)	05/25/2001 DATE
--	---------------------------

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
---	---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMAS DOROTHY 355 S. DR. MLK BLVD DAYTONA BEACH FL 32114 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COOK SHEILA 1028 ORNAGE AVE DAYTONA BEACH FL 32114 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCD HINSON FREEMAN 1135 EDITH DRIVE DAYTONA BEACH FL 32114 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD SHEFFIELD ERNEST F 1160 EDITH DRIVE DAYTONA BEACH FL 32114 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: SHEILA COOK SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	SD Date	05/25/2001 Date
--	-------------------	---------------------------

CR2E037 (11/00)