## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 07, 2007 08:00 All Secretary of State DOCUMENT # N97000006733 RETIREES OF RICHMOND HEIGHTS INCORPORATED Principal Place of Business Mailing Address 14640 LINCOLN BLVD MIAMI FL 33176 14640 LINCOLN BLVD **MIAMI FL 33176** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, otc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEL Number Not Applicable 65-0800528 Zip Country Zιp Country \$8.75 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLAKELY, CHARLES E Street Addross (P.O. Box Number is Not Acceptable) 14901 FILLMORE ST MIAMI FL 33176-7615 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 3 am familiar with, and accept CHARLES E. BLAKELY, PRESIDENT (NOTE: Registered Agent signature required when re-FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TIFLE Delete TITLE ☐ Change D ☐ Addition NAME NAME U00000626452 GRAY, CHARLES 02/15/07-80021-015 70.00 STREET ADDRESS STREET ADDRESS 14000 MONROE ST. CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP Change mie ☐ Defete TITLE Addition BLAKELY, CHARLES E NAME NAME STREET ADDRESS 14901 FILMORE ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33176** Delete TITLE ☐ Change ☐ Addition HILE NAMI' NAME HOLLOWAY, RAYMOND STREET ADDRESS STREET ADDRESS 14201 JACKSON ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33176 Addition HILE ☐ Delete TITLE D NAME BAILEY, JAMES STREET ADDRESS STREET ADDRESS 10305 SW 149 TERR CITY-SI-ZIP CITY-ST-ZIP MIAMI FL 33176 ☐ Delete Change ☐ Addition THE NAME SMITH, CATHERINE I STREET ADDRESS 10770 S.W. 150TH TERRACE STREET ADDRESS CITY-S1-ZIP **MIAMI FL 33176** CITY - ST - ZiP HITLE ☐ Delete TITLE ☐ Change Addition STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutos. 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:

CHARLES E. BLAKELY

Charle Blakely

(305) 235-4550