

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002415

FILED
May 07, 2009
Secretary of State

Entity Name: TRI-COUNTY COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

12400 SW 33RD STREET
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

12400 SW 33RD STREET
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 31-1631158 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NELSON, BELL
12400 SW 33RD STREET
MIRAMAR, FL 33027 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: STD () Delete
Name: BELL, NEDELKA
Address: 12400 SW 33RD STREET
City-St-Zip: MIRAMAR, FL 33027

Title: VCD () Delete
Name: BELL, JUSTIN
Address: 12400 SW 33RD STREET
City-St-Zip: MIRAMAR, FL 33023

Title: CD () Delete
Name: FREDERICK, NORMA
Address: 10031 PINES BOULEVARD, SUITE #239
City-St-Zip: PEMBROKE PINES, FL 33023

Title: PRES () Delete
Name: BELL, NELSON N
Address: 12400 SW 33RD STREET
City-St-Zip: MIRAMAR, FL 33027

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NELSON BELL

PRES

05/07/2009

Electronic Signature of Signing Officer or Director

Date