## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000003354

FILED Sep 08, 2004 Secretary of State

Entity Name: E.W. GRAHAM COMMUNITY DEVELOPMENT CENTER, INC.

| Current Pri                                 | ncipal Plac                                      | e of Business:   |                      | New Princi                                  | ipal Place of   | Business:       |                       |  |
|---|--|--|----------------------|---|---|-----------------|-----------------------|--|
| MILL STREI<br>P.O. BOX 6:<br>WHITE SPF      | 56   | 32096  |                      |   |   |                 |                       |  |
| Current Mailing Address:                    |  |  |                      | New Mailing Address:                        |   |                 |                       |  |
| P.O. BOX 6:<br>WHITE SPF                    |  | 32096  |                      |   |   |                 |                       |  |
| FEI Number:                                 | 59-3542794                                       | FEI Number Applied I                                       | For ( ) FEI Num      | nber Not Appli                              | cable ( )   | Certificate of  | Status Desired (X)    |  |
| Name and A                                  | Address of                                       | Current Registered A                                       | Agent:               | Name and                                    | Address of N  | lew Registe     | red Agent:            |  |
| WILLIAMS,<br>16797 MILL<br>WHITE SPF        | STREET   | 32096 US   |                      | 16797 MILL                                  | BERNARD L<br>STREET<br>RINGS, FL 32                     | 2096 US         |                       |  |
| The above r<br>in the State                 |  | v submits this statemer                                    | it for the purpose o | f changing it                               | s registered o  | office or regis | tered agent, or both, |  |
| SIGNATUR                                    | E: BERNA   | RD L. WILLIAMS   |                      |   |   | 09/08           | /2004                 |  |
|   | Electro  | onic Signature of Regis                                    | tered Agent          |   |   | Date            | ₽                     |  |
| OFFICERS                                    | AND DIRE   | CTORS:   |                      | ADDITION                                    | S/CHANGES   | TO OFFICE       | RS AND DIRECTORS      |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | WILLIAMS, B<br>P.O. BOX 21                       | ) Delete<br>ERNARD L<br>16797 MILL STREET<br>NGS, FL 32696 |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )   | ) Change()Ao    | ddition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | VP (<br>SCOTT, VIVIA<br>COUNTY ROA<br>JASPER, FL | AD 158   |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )   | ) Change()Ao    | ddition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | STEWART, H<br>16718 BRAN                         |  |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | T (X)<br>BROWN, MELV<br>15176 99 S.E. V<br>WHITE SPRING | WAY             | ddition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | UDELL, COR<br>10461 2ND S                        |  |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | S (X)<br>UDELL- FORD,<br>10461 2ND STE<br>WHITE SPRING  | REET            | ddition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: |  |  |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | D (X)<br>CARVER, LARE<br>7891 S.E CR 13<br>WHITE SPRING | 35              | ddition               |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | OSBURN, RA<br>10171 S.E. 1                       |  |                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( )   | ) Change()Ad    | ddition               |  |

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: CORETTA UDELL-FORD S 09/08/2004

YONNA WHITE, TEEN DIRECTOR P.O. BOX 656 WHITE SPRINGS, FL 32096

ANTHONY MCKIRE, DIRECTOR P.O. BOX 656 WHITE SPRINGS, FL 32096

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