

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003354

FILED
Sep 07, 2005
Secretary of State

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

Current Principal Place of Business:

MILL STREET
P.O. BOX 656
WHITE SPRINGS, FL 32096

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 656
WHITE SPRINGS, FL 32096

New Mailing Address:

FEI Number: 59-3542794 **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:

Name and Address of New Registered Agent:

WILLIAMS, BERNARD L
16797 MILL STREET
WHITE SPRINGS, FL 32096 US

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: P () Delete
Name: WILLIAMS, BERNARD L
Address: P.O. BOX 21 16797 MILL STREET
City-St-Zip: WHITE SPRINGS, FL 32696

Title: VP () Delete
Name: SCOTT, VIVIAN
Address: COUNTY ROAD 158
City-St-Zip: JASPER, FL 32052

Title: T () Delete
Name: BROWN, MELVIN SR
Address: 15176 99 S.E. WAY
City-St-Zip: WHITE SPRING, FL 32096

Title: S () Delete
Name: UDELL- FORD, CORETTA
Address: 10461 2ND STREET
City-St-Zip: WHITE SPRING, FL 32096

Title: D () Delete
Name: CARVER, LARRY
Address: 7891 S.E CR 135
City-St-Zip: WHITE SPRINGS, FL 32096

Title: D () Delete
Name: OSBURN, RANDY
Address: 10171 S.E. 161 AVE.
City-St-Zip: WHITE SPRING, FL 32096

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:

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: CORETTA UDELL-FORD

S

09/07/2005

Electronic Signature of Signing Officer or Director

Date