

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003588

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** RAYMOND OWENS COMMUNITY DEVELOPMENT, INC.

**Current Principal Place of Business:**

1406 N.E. 2 ST.  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

1406 NE 2ND STREET  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

PO BOX 593  
DEERFIELD BEACH, FL 33443

**New Mailing Address:**

FEI Number: 65-0531961

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OWENS, RAYMOND JR.  
340 S.W. 14TH ST.  
DEERFIELD BEACH, FL 33442 US

**Name and Address of New Registered Agent:**

OWENS, RAYMOND JR  
340 SW 14TH STREET  
DEERFIELD BEACH, FL 33441 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: RAYMOND OWENS, JR

03/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OWENS, RAYMOND JR.  
Address: 340 S.W. 14TH ST.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TD ( ) Delete  
Name: OWENS, SHUMIE  
Address: 340 S.W. 14TH ST.  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD ( ) Delete  
Name: LORRAINE, LILIAN  
Address: 340 S.W. 14TH ST.  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: OWENS, RAYMOND JR  
Address: 340 SW 14TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: TD (X) Change ( ) Addition  
Name: OWENS, SHUMIE L  
Address: 340 SW 14TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD (X) Change ( ) Addition  
Name: LORRAINE, LILIAN  
Address: 340 SW 14TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

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: RAYMOND OWENS, JR

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date