2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004517

FILED Jun 21, 2006 Secretary of State

Entity Name: R.M. LEE COMMUNITY DEVELOPMENT CENTER, INC.

New Principal Place of Business: Current Principal Place of Business: 900 N. SEACREST BLVD. BOYNTON BCH, FL 33435 **Current Mailing Address: New Mailing Address:** P.O. BOX 370 BOYNTON BEACH, FL 33425 FEI Number: 65-0937804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: EDMONDS, ALEXANDER JR. 6084 STRAWBERRY LAKE CIRCLE LAKE WORTH, FL 33463 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition EDMONDS, ALEXANDER JR BOLDON, JIM Name: Name: 6084 STRAWBERRY LAKES CIRCLE Address: 879 WINDTREE WAY Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: (X) Change () Addition CHAPMAN, MARCUS Name: CHANEY, LANCE Name: Address: 7276 COOPERFIELD CIRCLE Address: 238 BIRCH STREET City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: BOYNTON BEACH, FL 33426 Title: () Delete Title: (X) Change () Addition SHERROD, OCTAVIA WATSON, LARRY Name: Name: 150 NE 17 COURT Address: Address: 23 VALENCIA DRIVE City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: (X) Change () Addition Name: DAVIS, CRAIG Name: EDMONDS, ALEXANDER JR 6084 STRAWBERRY LAKES CIRCLE Address: 917 NW 37TH AVENUE Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: LAKE WORTH, FL 33463 Title: () Delete Title: () Change () Addition HEATH, EARL Name: Name: 126 N. 6TH AVE Address: Address: BOYNTON BEACH, FL 33435 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ODOM, YVONNE Name: Name: Address: 3905 LOWSON BLVD. Address: DELRAY BEACH, FL 33445 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM BOLDON P 06/21/2006