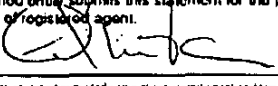


FILED
May 10, 2007 8:00 am
Secretary of State

04-03-2007 90012 031 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)

DOCUMENT # N99000004947			
1. Entity Name CARIBBEAN-AMERICAN FOR COMMUNITY INVOLVEMENT IN FLORIDA INC.			
Principal Place of Business 1030 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411		Mailing Address 1030 ROYAL PALM BEACH BLVD. ROYAL PALM BEACH FL 33411	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0965408		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WHITE, GENIEVE 2301 LAKEVIEW DRIVE WEST PALM BEACH FL 33411		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 4-14-07 Signature, typed or printed name of registered agent and fee if applicable (N/A) Register as Agent Signature required when registering.			
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
1001 NAME STREET ADDRESS CITY, ST, ZIP	PD FERRIN-DAVIS, RHONDA 2131 F ROAD LOXAHATCHEE FL 33470 ☐ Delete	1101 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
1002 NAME STREET ADDRESS CITY, ST, ZIP	VD FREDERICK, PINTO 123 HERON PKWY. ROYAL PALM BEACH FL 33411 ☐ Delete	1102 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
1003 NAME STREET ADDRESS CITY, ST, ZIP	VD WHITE, GENIEVE 2301 LAKEVIEW DR ROYAL PALM BEACH FL 33411 ☐ Delete	1103 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
1004 NAME STREET ADDRESS CITY, ST, ZIP	TD LANNAMAN, KATHLEEN 138 QUEENS LN ROYAL PALM BEACH FL 33411 ☐ Delete	1104 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
1005 NAME STREET ADDRESS CITY, ST, ZIP	SD AIKEN, MARJORIE 199 PARKWOOD DR ROYAL PALM BEACH FL 33411 ☐ Delete	1105 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
1006 NAME STREET ADDRESS CITY, ST, ZIP	SD HARRIS, LASCELLES 12707 TEMPLE BLVD WEST PALM BEACH FL 33412 ☒ Delete	1106 NAME STREET ADDRESS CITY, ST, ZIP	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 5/8/07 Phone 561-793-4055	

KATHLEEN LANNAMAN