


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000006228 1. Entity Name GENERAL FOREMAN COMMUNITY DEVELOPMENT, INC.				FILED 05 OCT -3 PM 12:41 SECRETARY OF STATE 1000	
Principal Place of Business 1720 NW 3RD CT FT LAUDERDALE, FL 33311		Mailing Address 1720 NW 3RD CT FT LAUDERDALE, FL 33311			
2. Principal Place of Business 1720 NW 3rd Ct Fort Lauderdale, FL		3. Mailing Address 1720 NW 3rd Ct. Fort Lauderdale, FL			
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A			
City & State FT. LAUDERDALE, FL		City & State Fort Lauderdale, FL		4. FEI Number 26-1329046	
Zip 33311		Country USA		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent FOREMAN, GENERAL 1720 NW 3RD CT FT LAUDERDALE, FL 33311		7. Name and Address of New Registered Agent Name General Foreman Street Address (P.O. Box Number is Not Acceptable) 1720 NW 3rd Ct City Fort Lauderdale, FL Zip Code 33311			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOREMAN, GENERAL 1720 NW 3RD CT FT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	00006020260 10/04/05--01008--004 **61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FOREMAN, CARRIE 1720 NW 3RD CT FT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OLIVER, MAMIE PO BOX 327 MIDDLEBURG, FL 32068	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS TARRENCE, BETTY 1720 NW 3RD CT FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AP FOREMAN JR, GENERAL 1720 NW 3RD CT FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD FOREMAN, LEONIA 1720 NW 3RD CT FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 17, 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: <u>General Foreman</u> <u>President</u> <u>9/21/05</u> <u>(954) 584-3507</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					