

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000118888

FILED
Feb 11, 2009
Secretary of State

Entity Name: COMMUNITY CAPACITY BUILDERS, INC.

Current Principal Place of Business:

7121 ALHAMBRA BLVD
MIRAMAR, FL 33023 US

New Principal Place of Business:

Current Mailing Address:

11020 PEMBROKE ROAD #211
MIRAMAR, FL 33025

New Mailing Address:

7121 ALHAMBRA BLVD
MIRAMAR, FL 33023

FEI Number: 80-0021402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, EDWARD
7121 ALHAMBRA BLVD
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

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: EDWAED HAYNES

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: HAYNES, EDWARD
Address: 7121 ALHAMBRA BLVD
City-St-Zip: MIRAMAR, FL 33023 US

Title: D () Delete
Name: HAYNES, CANDYCE
Address: 7121 ALHAMBRA BLVD
City-St-Zip: MIRAMAR, FL 33023 US

Title: D () Delete
Name: HAYNES, ADRIENE
Address: 7121 ALHAMBRA BLVD
City-St-Zip: MIRAMAR, FL 33023 US

Title: D () Delete
Name: HAYNES, CHAKARA
Address: 7121 ALHAMBRA BLVD
City-St-Zip: MIRAMAR, FL 33023

Title: D () Delete
Name: BROWN, JULIA
Address: 1601 NW 81ST ST
City-St-Zip: MIAMI, FL 33147

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD HAYNES

PST

02/11/2009

Electronic Signature of Signing Officer or Director

Date