

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004508

FILED
Feb 25, 2010
Secretary of State

Entity Name: COMMUNITY FUND OF NORTH MIAMI-DADE, INC.

Current Principal Place of Business:

490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA, FL 330543563

New Principal Place of Business:

Current Mailing Address:

490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA, FL 330543563

New Mailing Address:

FEI Number: 41-2025826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOGAN, WILLIE
490 OPA-LOCKA BLVD., STE. 20
OPA-LOCKA, FL 330543563 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: PEMBERTON, DAVE
Address: 2520 NW 156 ST
City-St-Zip: OPA LOCKA, FL 33054

Title: V
Name: LOGAN, WILLIE
Address: 490 OPA-LOCKA BLVD., STE. 20
City-St-Zip: OPA-LOCKA, FL 330543563

Title: S
Name: WILLIAMS-BALDWIN, STEPHENIE
Address: 490 OPA-LOCKA BLVD., STE. 20
City-St-Zip: OPA-LOCKA, FL 330543563

Title: T
Name: MARTIN, MICHAEL
Address: 6418 NW 82 AVE
City-St-Zip: PARKLAND, FL 33067

Title: D
Name: COWINS, BILL
Address: 2204 ALI BABA AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D
Name: BARRY-SMITH, MARCIA
Address: 8201 N UNIVERSITY DR
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: DAVID PEMBERTON

P

02/25/2010

Electronic Signature of Signing Officer or Director

Date