2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050684

Entity Name: COMMUNITY FIRST INVESTMENTS, INC.

FILED Jul 16, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	/ 157TH AVE. EAD, FL 33033			
Current Mailing Address:			New Mailing Address:	
	/ 157TH AVE. EAD, FL 33033			
FEI Number	r: 65-0844338	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
	NIEL / 157TH AVE. EAD, FL 33033	US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
	Electron	ic Signature of Registered Ag	ent	Date
		3(2)(b), F.S., the corporation did n	ot receive the prior notice.	
		Trust Fund Contribution ().	ADDITIONS/CHANCE	ES TO OFFICERS AND DIRECTOR
OFFICER	S AND DIREC	ioks:	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTOR
Title:	. ,	Delete		() Change () Addition
Name: Address:	EPLING, ROBE 28801 SW 157		Name: Address:	
City-St-Zip:	HOMESTEAD, F		City-St-Zip:	
T '' (1		5.1.1		() A LEE
Title:	` '	Delete	Title:	() Change () Addition
Name:	LIPE, DANIEL	FLI A)/E	Name:	
Address:	28801 SW 157 HOMESTEAD, F		Address:	
City-St-Zip:	FICIVILS FEAD, F	L 33033	City-St-Zip:	
Title:	D ()	Delete	Title:	() Change () Addition
Name:	CARPENTER, V		Name:	
Address:	28801 SW 157		Address:	
City-St-Zip:	HOMESTEAD, F	FL 33033	City-St-Zip:	
Title:	V ()	Delete	Title:	() Change () Addition
Name:	BROUWER, DA		Name:	
Address:	28801 SW 157		Address:	
City-St-Zip:	HOMESTEAD, F		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: DAVID BROUWER	V	07/16/2007