

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007193

**Entity Name:** COMMUNITY 360 INCORPORATED

**Current Principal Place of Business:**

7971 RIVIERA BLVD  
SUITE #311  
MIRAMAR, FL 33023

**FILED**  
**Apr 28, 2017**  
**Secretary of State**  
**CC0169493404**

**Current Mailing Address:**

7971 RIVIERA BLVD  
SUITE #311  
MIRAMAR, FL 33023 US

**FEI Number: 82-1320192**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

GAMBLE, LENORA  
6724 SW 28 CT  
MIRAMAR, FL 33023 US

*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

**Officer/Director Detail :**

Title P  
Name GAMBLE, LENORA  
Address 6724 SW 28 CT  
City-State-Zip: MIRAMAR FL 33023

Title VP  
Name WHEELER, BRITTANY  
Address 6724 SW 28 CT  
City-State-Zip: MIRAMAR FL 33023

Title D  
Name CLAYTON, VALERIE  
Address 4451 NW 168 TERR.  
City-State-Zip: MIAMI GARDENS FL 33055

Title D  
Name JOHNSON, SHANDELA  
Address 4451 NW 168 TERR.  
City-State-Zip: MIAMI GARDENS FL 33055

Title D  
Name INNOCENT, VENUSE  
Address 10960 SW 15 ST  
City-State-Zip: PEMBROKE PINES FL 33025

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

**SIGNATURE: LENORA GAMBLE**

**PRESIDENT**

**04/28/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date