


FILE NOW: FILING FEE IS \$61.25

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Mar 02, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736167

1. Corporation Name

PARC HOUSING, INC.

Principal Place of Business

3190 75TH STREET NORTH
 ST. PETERSBURG FL 33710

Mailing Address

3190 TYRONE BLVD NORTH
 ST. PETERSBURG FL 33710
 US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		06/21/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1700361	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Zip	25	Country	29	30

9. Name and Address of Current Registered Agent

THOMAS, CURTIS D
 3190 TYRONE BLVD NORTH
 ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS, CURTIS D	1.2 NAME	David Pilkington
STREET ADDRESS	3190 TYRONE BLVD NORTH	1.3 STREET ADDRESS	11701 Belcher Rd Ste.104
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	Largo, FL 33643
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOLLAND, JUDY	2.2 NAME	Paul O'Connell
STREET ADDRESS	4020 11TH ST NO	2.3 STREET ADDRESS	9731 Sago Point Drive
CITY-ST-ZIP	ST. PETERSBURG FL 33703	2.4 CITY-ST-ZIP	Largo, FL 33777
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL, WALTER C	3.2 NAME	
STREET ADDRESS	516 17TH AVE SE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33704	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GADDY, RODNEY	4.2 NAME	
STREET ADDRESS	11913 KEATING DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33626	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEEREN, BRIAN	5.2 NAME	
STREET ADDRESS	8632 LONGWOOD DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	LARGO FL 33777	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLEMAWESCH, JANE	6.2 NAME	
STREET ADDRESS	936 MYAKKA CT	6.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33702	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ SIGNATURE REQUIRED _____ 1/5/99 _____ Date _____ Daytime Phone # _____

CR2E037 (11/98)