

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90035 023 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N01000005744

1. Entity Name
AVON PARK HOUSING DEVELOPMENT CORPORATION



Principal Place of Business
21 TULANE DRIVE
AVON PARK, FL 33825

Mailing Address
PO BOX 1327
AVON PARK, FL 33825

60006404



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
51-0499312

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$6.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHOEMAN, LARRY P
21 TULANE DR
SEBRING, FL 33825

Name
Larry P. Shoeman

Street Address (P.O. Box Number is Not Acceptable)
21 Tulane Drive

City
Avon Park

FL

Zip Code
33825

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	ROBERTS, LESTER A	1002 S WALDRON AVE	AVON PARK, FL 33825	<input type="checkbox"/>
VD	PERRIN, MARIAN	313 DOVE STREET	SEBRING, FL 33872	<input type="checkbox"/>
SD	SHOEMAN, LARRY	21 TULANE DRIVE	AVON PARK, FL 33825	<input type="checkbox"/>
D	WILLIAMS, MINNETTE	1713 LAKE LOTELA DR	AVON PARK, FL 33825	<input type="checkbox"/>
D	DEVLIN, PAUL M	315 TULANE CIR.	AVON PARK, FL 33825	<input type="checkbox"/>
D	YEGGY, DEBORAH	516 WEST CIRXLE ST	AVON PARK, FL 33825	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	Donna Vinson	930 U.S. 27 South	Avon Park, Florida 33825	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/09/07 863 452-4452