2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N02000008254

Entity Name: NEIGHBORHOOD PARTNERSHIP FOR ASSISTED HOUSING CORPORATION

Current Principal Place of Business:

9223 54TH COURT EAST
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

9223 54TH COURT EAST
PARRISH, FL 34219

New Mailing Address:

4949 E. SR 64
406
BRADENTON, FL 34208

FEI Number: 11-3655064 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DESUE, WENSTON B
9223 54TH CT E
PARRISH, FL 34219 US

Name and Address of New Registered Agent:

SHAW, STEPHANIE
4949 E. SR 64
406
BRADENTON, FL 34208 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: STEPHANIE SHAW 01/09/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DESUE, WENSTON
Address: 9223 54TH CT E
City-St-Zip: PARRISH, FL 34219

Title: VP ( ) Delete
Name: JONES, MARJANI D
Address: 1609 9TH AVE E
City-St-Zip: BRADENTON, FL 34208

Title: S ( ) Delete
Name: LUCAS, MARK E
Address: 912 DELANY CIR
City-St-Zip: BRANDON, FL 33511

Title: D ( ) Delete
Name: SILVERTHORNE, J.R.
Address: 1819 MAIN STREET SUITE 210
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENSTON B. DESUE P 01/09/2009
Electronic Signature of Signing Officer or Director Date