FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N93000002998 (3) **DOCUMENT** #

FIRST COAST FAMILY AND HOUSING FOUNDATION, INC.								
		-		l				
Principal Plac	e of Business	Mailing Address			103(11)781			
•		_		L				
225 WATER STREET 225 WATER STREET 3RD FLOOR 3RD FLOOR					3. Date Incorporated or Qualified			
JACKSONVILLE FL 32202 JACKSONVILLE FL 32202			02	ļ	07/06/1993			
				1	4. FEI Number			plied For
9 Principal P	Place of Business	2a. Mailing Address			59-3206820			t Applicable
	N. Main Street	<u> </u>			5. Certificate of Status Desired		\$8.75 A	
Suite, Apt.	#, elc.	26 1 3 2 1 N M Suite, Apt. #, etc.	ain Street		6. Election Campaign Financing		\$5.00 A	
22 2nd F	loor	27 2nd Floo	r	- 1	Trust Fund Contribution		Added to	
City & Stat		City & State			7. Is this nonprofit corporation a h	nomeowners	s association	1?
	onville, FL	28 Jacksonv	ille, FL				Z No	
Zip 24 32206	Country	Zip	Country		8. This corporation owes or has p			
24 32200	25 Duval 9. Name and Address of Current	29 32206	30 Duval		Personal Property Tax due Jun 10. Name and Address of New R			No
			81 Name	1		ogrator ou z	- Mont	
PACKARD, KRISTEN K			00 00-00	Beth J. Dickinson				
225 WATER STREET			82 Street		Address (P.O. Box Number is Not Acceptable) 1321 N. Main Street, 2nd Floor			
3RD FLOOR			83			- J L		
JACKSO	INVILLE FL 32202		84 City		. 		lest Zin C	odo
			[]	Jacl	ksonville	FL	85 Zip C	206
11. Pursuant office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State o im lappliar with, and accept the obligati	and 617.1508, Florida State of Florida, Such change was	itutes, the above-named	d corpora	ation submits this statement for the	purpose of	changing its	s registered
agent. I a	im familiar with, and accept the obligati	ions of Section 617,0503	Florida Statutes	poration	to board or anoctors. Thorse, about	opt into uppo	on an one do	Ogiotoloa
	\mathcal{M} . \mathcal{M} \mathcal{M} .		TIOTAG GIALGIOS.				^	
SIGNATURE .	Bette O. Billi					<u>~28</u> .	-98	
SIGNATURE	Joseph Company of the	Beth	J. Dickins NOTE. Registered Agent signature 13.		when reinstating)	~_28 . DATE	-98	
	OFFICERS AND	Beth	J. Dickins NOTE. Registered Agent signature			DATE CERS AND	-98	
12.	OFFICERS AND ARNALL, JOSEPH	Beth and tille if applicable DIRECTORS	J. Dickins NOTE. Registered Agent signature 13.		when reinstating)	DATE CERS AND	DIRECTORS	S IN 12
12.	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD.	Beth and tille if applicable DIRECTORS	J Dickins NOTE Registered Agent signature 13. 1.1 TITLE		when reinstating)	DATE CERS AND	DIRECTORS	S IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225	Beth and tille if applicable DIRECTORS DELETE	Dickins NOTE. Registered Agent signature 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	e required	when reinstating)	DATE CERS AND	DIRECTORS Change	S IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225	Beth and tille if applicable DIRECTORS	Dickins NOTE Registered Agent signature 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	D	when relnatating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTORS	S IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225	Beth and tille if applicable DIRECTORS DELETE	Dickins NOTE Registered Agent signature 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	D Knu	when relnaising) ADDITIONS/CHANGES TO OFFI 1tzen, James V.	A DATE CERS AND	DIRECTORS Change	S IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TO MILLER, ROBERT L 121 WEST FORSYTH ST., STE.	Beth and tille if applicable DIRECTORS DELETE	Dickins NOTE Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	D Knu	when relnatating) ADDITIONS/CHANGES TO OFFI ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS Change	S IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TO MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202	Beth and tille II applicable DIRECTORS DELETE 200	Dickins 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D Knu 310	when reloaking) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3	vd.,	DIRECTORS Change Change Suite	S IN 12 Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TO MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD	Beth and tille if applicable DIRECTORS DELETE	Dickins NOTE Registered Agent signature 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	D Knu	when reloaking) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3	vd.,	DIRECTORS Change	S IN 12 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TO MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202	Beth and tille II applicable DIRECTORS DELETE 28 DELETE DELETE	Dickins 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	D Knu 310	when reloaking) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3	vd.,	DIRECTORS Change Change Suite	S IN 12 Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TO MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A	Beth and tille II applicable DIRECTORS DELETE 28 DELETE DELETE	Dickins NOTE Registered Agent signature 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	D Knu 310	when reloaking) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3	vd.,	DIRECTORS Change Change Suite	S IN 12 Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D	Beth and tille II applicable DIRECTORS DELETE 28 DELETE DELETE	Dickins 13. 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	D Knu 310	when reloaking) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3	vd.,	DIRECTORS Change Change Suite	S IN 12 Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE	Dickins 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	D Knu 310 Jac VPS	when reloating) ADDITIONS/CHANGES TO OFFI Atzen, James V. O University B1 eksonville, FL 3	vd.,	OIRECTORS Change Change Change Change	S IN 12 Addition Addition 230 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE	Dickins 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd.,	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 230 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE DELETE	Dickins 13. 1.1 Title 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 Title 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	D Knu 310 Jac VPS	when reloating) ADDITIONS/CHANGES TO OFFI Atzen, James V. O University B1 eksonville, FL 3	vd.,	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 2 3 0 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100 JACKSONVILLE BEACH FL 322	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE	Dickins 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd.,	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 230 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100 JACKSONVILLE BEACH FL 322 D BEYAH, MALACHI	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE DELETE	Dickins 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd.,	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 2 3 0 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100 JACKSONVILLE BEACH FL 322 D BEYAH, MALACHI P.O. BOX 12104-N-A	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE DELETE	Dickins 13. 1.1 Title 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd.,	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 2 3 0 Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100 JACKSONVILLE BEACH FL 322 D BEYAH, MALACHI P.O. BOX 12104-N-A JACKSONVILLE FL	Beth and tille if applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	Dickins 13. 1.1 Title 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Title 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd., 2216	OIRECTORS Change Change Change Change Change Change	S IN 12 Addition Addition 2 3 0 Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD ARNALL, JOSEPH 9570 REGENCY SQ. BLVD. JACKSONVILLE FL 32225 TD MILLER, ROBERT L 121 WEST FORSYTH ST., STE. JACKSONVILLE FL 32202 VPSD MOORE, TERRY A 50 N. LAURA STREET, STE. 31 JACKSONVILLE FL 32202 D ROOD, JOHN D 3030 HARTLEY RD., SUITE 100 JACKSONVILLE BEACH FL 322 D BEYAH, MALACHI P.O. BOX 12104-N-A	Beth and tille II applicable DIRECTORS DELETE 200 DELETE DELETE DELETE DELETE DELETE	Dickins 13. 1.1 Title 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	D Knu 310 Jac VPS	when relnatating) ADDITIONS/CHANGES TO OFFI ATZEN, James V. O University B1 Eksonville, FL 3 ETD	vd., 2216	DIRECTORS Change Change Suite Change	S IN 12 Addition Addition 2 3 0 Addition

CITY-ST-ZIP

JACKSONVILLE FL 32202

14. Thereby 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 angual report is frue 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 attackyment with an address.

FILED

Mar 03 1998 8:00am

Secretary of State