## 5-13-97 B- 1 37 -NC FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



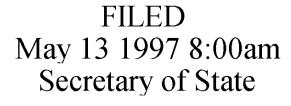
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

N95000004679 (5) DOCUMENT #

HOMES FOR INDEPENDENCE, INC.





Principal Place of Business Malling Address  2735 WHITNEY ROAD POST OFFICE BOX 4010 CLEARWATER FL 34618 CLEARWATER FL 34618-4010									4 (9011101) E16 (0101 011) 02111 00111	E	*****		1811 1481
								Ì	3. Date Incorporated or Qualified 10/03/1995	3a. C	of Le 05/01	st Repo /1996	rl
2. Principal P	lace of Busin	ness	28.	2a. Mailing Address					4. FEI Number Applied For				id For
21			26						55-3342379 Not Applicable				
Suite, Apt.			27						5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State				City & State					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip	- ·			<u></u>			ountry		This corporation has liability for intangible tax under s. 199.032,				
24	25 9. Name and Address of Current		29			30			Florida Statutes Yes No  10. Name and Address of New Registered Agent				
	y, Name	and Address of Curre	nt Hogis	stered Agent		B1	Name		10. Name and Address of New He	gistered	Agent	. 1 - 41	
041150		11444 10					INGITIO						
SANDONATO, WILLIAM JR. 2735 WHITNEY ROAD						82	Street	Addres	ess (P.O. Box Number is Not Acceptable)				
CLEARWATER FL 34618						83	'[						j.
						84			4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	FL	-	Zip Cod	
11. Pursuant office or a agent. La	to the provis registered ag am familiar w	sions of Sections 617.05 gent, or both, in the Stat ith, and accept the obli	02 and 6 e of Flori gations o	317.1508, Florida Statul ida: Such change was of, Section 617.0503, Fl	tes, the a authorize orida Sta	bov d by tute:	e-named y the corp s.	l corpor poration	ation submits this statement for the price board of directors. I hereby accept	ot the ap	of changi pointmen	ng its re t as reg	gistered istered
SIGNATURE			_										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re							ent signature	required	red when reinstating)  OATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	D OFFICERS AND			DIRECTORS DELETE		13. 1.1 TITLE		T	ADDITIONS/CHANGES TO OFFIC	ERS AN	Char		Addition
	_	NATO, WILLIAM JR.						ŀ			t Olio	ı¥u L.	ן וועוועטרע ב
NAME		HITNEY ROAD			1.2 N		. ADDDECC						
STREET ADDRESS		WATER FL 34618			·		ADDRESS						
CITY-ST-ZIP	D	MATER I E OTO IO		☐ DELETE	2.1 1		ST-ZIP				Char	noe T	Addition
NAME	_	JRG, JACK D			2.2 N					•		• -	
STREET ADDRESS		HITNEY ROAD					ADDRESS	İ					
CITY-ST-ZIP		WATER FL 34618					ST-ZIP	}					
TITLE	D	ITAILITE GOOD	<del></del>	DELETE	311		at vzir	<del> </del>			Chai	nge L	Addition
NAME	TITUS,	GARY			3.2 N							_	
STREET ADDRESS		S. CAROLINA AVEN	UE		1		ADDRESS		•				
CITY-S1-ZIP	TAMPA FL						3.4. CITY-ST-ZIP						
THILE	7. W.D. FT	<u> </u>		☐ DELETE	4.1 T			3			Char	nge	Addition
NAME	[			<del>_</del>	4.21			_	*->-+				
STREET ADDRESS	]				4,3 S	TREET	ADDRESS		,				)
CITY-ST-ZIP							ST-21P	ŀ					
TITLE				DELETE	5.1 T						Char	nge [	Addition
NAME					5.2 N	AME							
STREET ADDRESS					5.3 S	TREET	ADORESS						
CITY-S1-ZIP	[						ST-2IP	1					- 1
TITLE	<u> </u>	······································		☐ DELETE	617	**********				·	Chai	nge [	Addition
NAME					6.2 N	AME							
STREET ADDRESS	ĺ				635	TREET	ADDRESS						
CITY-ST-ZIP					1		SY - ZIP						
	hy certify the	at the information suppli	ed with the	his filing does not qual				tated in	Section 119.07(3)(i) Florida Statute	s I furth	er 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.