

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004168

FILED
Apr 11, 2012
Secretary of State

Entity Name: WINTER HAVEN HOUSING SUPPORTIVE SERVICES, INC.

Current Principal Place of Business:

2653 AVE C S.W.
WINTER HAVEN, FL 33880

New Principal Place of Business:

Current Mailing Address:

2653 AVE C S.W.
WINTER HAVEN, FL 33880

New Mailing Address:

FEI Number: 45-2850542 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REED, ANDREW M
1828 S FLORIDA AVE
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D
Name: STANISLAUS, BREEZI
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: PD
Name: HUDSON, J.L.
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: HUDSON, JUDY
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: S
Name: LANDERS, LISA J
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: D
Name: HOGAN, JAMES CAPT
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

Title: VPD
Name: THOME, MURIEL
Address: 2653 AVE C S.W.
City-St-Zip: WINTER HAVEN, FL 33880

I hereby 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 all other like empowered.

SIGNATURE: LISA J. LANDERS

S

04/11/2012

Electronic Signature of Signing Officer or Director

Date