

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 713010

**Entity Name:** JOHN KNOX HOUSING, INC.

**Current Principal Place of Business:**

1035 ARLINGTON AVE. N.  
ST. PETERSBURG, FL 33705

**Current Mailing Address:**

1050 BURLINGTON AVE N  
ST. PETERSBURG, FL 33705

**FEI Number:** 59-1209293

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PETERSON, DEJE WRAY  
1050 BURLINGTON AVE N  
ST PETERSBURG, FL 33705 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:** DEJE PETERSON

05/07/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title ASST. SECRETARY

Name ASPY, EUGENE

Address 17 GOLF VIEW CIR

City-State-Zip: WINTER HAVEN FL 33881

Title VD

Name MINER, TOM

Address 2493 BREAKWATER CIR

City-State-Zip: SARASOTA FL 34231

Title TREASURER

Name MILLER, NANCY CLARK

Address 656 16TH AVE NE

City-State-Zip: ST. PETERSBURG FL 33704

Title VP, DIRECTOR

Name PIEPER, NATHANIEL

Address 823 S ROXMERE RD

City-State-Zip: TAMPA FL 33609

Title PRESIDENT, DIRECTOR

Name WILSON, JAMES

Address 16498 EDMONT DRIVE

City-State-Zip: FORT MYERS FL 33908

Title SECRETARY

Name SHAW, HELEN

Address 701 62ND AVE S

City-State-Zip: ST. PETERSBURG FL 33705

*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:** JAMES WILSON

PRESIDENT

05/07/2018

Electronic Signature of Signing Officer/Director Detail

Date