

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730972

Entity Name: GENESIS HOUSE, INC.**Current Principal Place of Business:**814 MELBOURNE AVE
MELBOURNE, FL 32901**Current Mailing Address:**P O BOX 2044
MELBOURNE, FL 32902**FEI Number:** 59-1595818**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLEN, MARY J
1201 PARKSIDE PLACE, UNIT 1201
INDIAN HARBOUR BEACH, FL 32937 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	STD
Name	CHEISMAN, LAURA K
Address	215 SUNRISE AVE.
City-State-Zip:	SATELLITE BEACH FL 32937

Title	D
Name	O'TOOLE, MARY K.
Address	3162 BEACH WINDS COURT
City-State-Zip:	MELBOURNE BEACH FL 32951

Title	D
Name	HILL, JANICE K
Address	1103 BALMORAL WAY
City-State-Zip:	MELBOURNE FL 32940

Title	DP
Name	ALLEN, MARY J
Address	1201 PARKSIDE PLACE, UNIT 1201
City-State-Zip:	INDIAN HARBOUR BEACH FL 32937

Title	D
Name	ALLEN, MICHAEL D
Address	3365 ERIE STREET
City-State-Zip:	COCOA FL 32926

Title	ADMINISTRATOR
Name	SNYDER, KRISTEN S
Address	2931 CAVEL ST.
City-State-Zip:	MELBOURNE FL 32904

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: KRISTEN S. SNYDER**ADMINISTRATOR****04/30/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date