## 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. 04/18/2013

PRESIDENT

#### SIGNATURE: ANDREW STRINGER

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# 740651

### Entity Name: SEBRING HOUSING RESEARCH & DEVELOPMENT, INC

### **Current Principal Place of Business:**

1800 TANGERINE AVE. SEBRING, FL 33870

## **Current Mailing Address:**

P. O. BOX 431 SEBRING. FL 33870

## FEI Number: 59-1786646

## Name and Address of Current Registered Agent:

STRINGER, ANDREW 219 ATTERBERRY DRIVE SEBRING, FL 33870 US

Date

Certificate of Status Desired: Yes

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

# **Officer/Director Detail :**

Title	Ρ	Title	V
Name	STRINGER, ANDREW	Name	MCCRAY, LYNN
Address	219 ATTERBURY DRIVE	Address	4255 STURGEONE DRIVE
City-State-Zip:	SEBRING FL 33870	City-State-Zip:	SEBRING FL 33870
Title	S	Title	VT
Name	JOHNSON, VIVIAN	Name	WALKER, BARBARA
Address	554 VALINCIA STREET	Address	920 BOOKER AVE
City-State-Zip:	SEBRING FL 33870	City-State-Zip:	SEBRING FL 33870
Title	D		
Name	LATTY, EDNA		
Address	1875 MARTIN LUTHER KING TERRACE		
City-State-Zip:	SEBRING FL 33870		

Date