2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005593

Entity Name: COMMUNITY HOUSING SOLUTIONS, INC.

FILED
Mar 03, 2015
Secretary of State
CC8822666873

Current Principal Place of Business:

4730-6TH AVE. SO.

ST. PETERSBURG, FL 33711

Current Mailing Address:

P.O. BOX 13711

ST. PETERSBURG. FL 33733

FEI Number: 26-2812074 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SMITH, GEORGE B 4754-ALCAZAR WAY SO. ST. PETERSBURG, FL 33712 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 D Title D

NameAQUIL, ASKIA MNameSMITH, GEORGE BAddress4730-6TH AVE. SO.AddressP.O. BOX 13711

City-State-Zip: ST. PETERSBURG FL 33711 City-State-Zip: ST. PETERSBURG FL 33733

Title D Title DIRECTOR

Name NELSON, BRENDA Name DEPUGH, ROBERT

Address P.O. BOX 13711 Address P.O. BOX 13711

City-State-Zip: ST. PETERSBURG FL 33733 City-State-Zip: ST. PETERSBURG FL 33733

Title DIRECTOR Title DIRECTOR

Name HUBBARD, JACQUELINE W Name EVANS, GENE
Address P.O. BOX 13711 Address P.O. BOX 13711

City-State-Zip: ST. PETERSBURG FL 33733 City-State-Zip: ST. PETERSBURG FL 33733

Title DIRECTOR

Name HAYNES II, WATSON L

Address P.O. BOX 13711

City-State-Zip: ST. PETERSBURG FL 33733

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: ASKIA MUHAMMAD AQUIL PRESIDENT 03/03/2015

Electronic Signature of Signing Officer/Director Detail

Date