

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50409

FILED
Apr 18, 2016
Secretary of State
CC6479256249

Entity Name: RESIDENTS COUNCIL OF THE HOUSING AUTHORITY OF THE COUNTY OF FLAGLER, FLORIDA, INC.

Current Principal Place of Business:

414 S BACHER STREET
BUNNELL, FL 32110

Current Mailing Address:

P. O. BOX 188
BUNNELL, FL 32110-0188 US

FEI Number: 59-3167186

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TURNER, KATIE
414 S BACHER STREET
BUNNELL, FL 32110-0188 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	P
Name	GIPSON, SUSAN
Address	414 S BACHER STREET
City-State-Zip:	BUNNELL FL 32110
Title	S
Name	ALLEN , THELMA
Address	414 S BACHER ST
City-State-Zip:	BUNNELL FL 32110
Title	M
Name	WASHINGTON, LULA MAE
Address	414 S BACHER STREET
City-State-Zip:	BUNNELL FL 32110

Title	VP
Name	TURNER, KATIE
Address	414 S BACHER ST
City-State-Zip:	BUNNELL FL 32110
Title	M
Name	ALLEN, THELMA
Address	414 S. BACHER STREET
City-State-Zip:	BUNNELL FL 32110
Title	M
Name	CLEARY, DOROTHY
Address	414 S. BACHER STREET
City-State-Zip:	BUNNELL FL

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: SUSAN GIPSON

PRESIDENT

04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date