

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004679

Entity Name: HOMES FOR INDEPENDENCE, INC.

Current Principal Place of Business:

2735 WHITNEY ROAD
CLEARWATER, FL 33760

Current Mailing Address:

2735 WHITNEY ROAD
CLEARWATER, FL 33760 US

FEI Number: 59-3342379

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMAS, GENE
2735 WHITNEY ROAD
CLEARWATER, FL 33760 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 DIRECTOR
Name GILBERT, DWIGHT
Address 1799 HIGHLAND AVE. #H-119
City-State-Zip: CLEARWATER FL 33755

Title PRESIDENT
Name CICCOLELLI, LISA
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760

Title CHAIRMAN
Name SUMNER, ROB
Address 601 64TH ST. N.
City-State-Zip: ST PETERSBURG FL 33710

Title SECRETARY
Name MCSHERRY, BARBARA
Address 2500 HARN BLVD #E-03
City-State-Zip: CLEARWATER FL 33764

Title TREASURER
Name SOUTHSCOTT, KEVIN
Address 4215 EAST BAY DRIVE
City-State-Zip: CLEARWATER FL 33764

Title DIRECTOR
Name LUMPKIN, MARK
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR
Name SMITH, RICHARD
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR
Name DRISCOLL, PATRICIA
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760

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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: LISA CICCOLELLI

PRESIDENT

02/18/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GOMEZ, AMANDA
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR
Name CRUZ, DAWN
Address 2735 WHITNEY ROAD
City-State-Zip: CLEARWATER FL 33760