

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712846

FILED
Mar 19, 2010
Secretary of State

Entity Name: ALCO HALF WAY HOUSE, INC.

Current Principal Place of Business:

1120 HUBBARD STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1120 HUBBARD STREET
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-6203034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKSON JAMES
10230 BEACH BLVD
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: JACKSON, JAMES P
Address: 10230 BEACH BLVD
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VD
Name: ROHRBACK, CLEVELAND W
Address: 3339 ALDRIDGE MALL
City-St-Zip: JACKSONVILLE, FL 32250 US

Title: SD
Name: ROYAL, DEBORAH
Address: 4606 ILAH RD
City-St-Zip: JACKSONVILLE, FL 32257 US

Title: TD
Name: BROOKS III, THOMAS W
Address: 1301 RIVERPLACE BLVD., #2014
City-St-Zip: JACKSONVILLE, FL 32207 US

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: JAMES P JACKSON

PD

03/19/2010

Electronic Signature of Signing Officer or Director

Date