

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 29, 2010
Secretary of State

DOCUMENT# 712846

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 ()

Name and Address of Current Registered Agent:JACKSON JAMES
10230 BEACH BLVD
JACKSONVILLE, FL 32246 US**Name and Address of New Registered Agent:**WHITAKER, JOSEPH E
4034 RIVER VALLEY ROAD, W
JACKSONVILLE, FL 32277 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: JOSEPH E. WHITAKER

09/29/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: WEATHERLY, BEN
Address: 3619 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: VD
Name: JOHNS, JANICE H
Address: 3063 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: SD
Name: WHITAKER, JOSEPH E
Address: 4034 RIVER VALLEY ROAD, W
City-St-Zip: JACKSONVILLE, FL 32277 US

Title: TD
Name: SIEGEL, JOHN M
Address: 3246 RANDALL STREET
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: DR
Name: WISE, MARY J
Address: 2547 BENNITS MILL WAY
City-St-Zip: TALLAHASSEE, FL 32312

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: JOSEPH E. WHITAKER

SD

09/29/2010

Electronic Signature of Signing Officer or Director

Date