

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712846

FILED  
Apr 19, 2011  
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:**

1120 HUBBARD STREET  
JACKSONVILLE, FL 32206 US

**Current Mailing Address:**

1120 HUBBARD STREET  
JACKSONVILLE, FL 32206

**New Mailing Address:**

1120 HUBBARD STREET  
JACKSONVILLE, FL 32206 US

FEI Number: 59-6203034

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WHITAKER, JOSEPH E  
4034 RIVER VALLEY ROAD, W  
JACKSONVILLE, FL 32277 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: DR  
Name: BRANSON, BASCOMB  
Address: 4002 ALDINGTON DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: PD  
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: LLOYD, SAMUEL O  
Address: 223 FLORIDA BOULEVARD, UNIT # 4  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: DR  
Name: WISE, MARY J  
Address: 1120 HUBBARD STREET  
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: DR  
Name: PLUMMER, JIM  
Address: 9378 ARLINGTON EXPRESSWAY, BOX 328  
City-St-Zip: JACKSONVILLE, FL 32225 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: JOSEPH E. WHITAKER

SD

04/19/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date