

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90116 050 \*\*\*\*61.25

0052852

DOCUMENT # 715427

1. Corporation Name

BETHANY HOUSING, INC.

Principal Place of Business

880 OLEANDER WAY SOUTH  
ST PETERSBURG FL 33707

Mailing Address

880 OLEANDER WAY SOUTH  
ST PETERSBURG FL 33707



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

10/17/1968

4. FEI Number

59-1361375

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

RENFROW, ROBERT P.  
5858 CENTRAL AVE.  
ST PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE V ☐ DELETE

NAME MASON, HORACE  
STREET ADDRESS 7505 US 19 NORTH, #46  
CITY-ST-ZIP PINELLAS PARK FL

TITLE D ☐ DELETE

NAME FLEMING, BEA  
STREET ADDRESS 6565 5TH AVE S  
CITY-ST-ZIP ST PETERSBURG FL 33707

TITLE ST ☐ DELETE

NAME HOFMEYER, GARY R  
STREET ADDRESS 6036 2ND AVE., NO  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE PD ☐ DELETE

NAME ELZEMAN, RICHARD  
STREET ADDRESS 2311 14TH AVE W  
CITY-ST-ZIP BRADENTON FL

TITLE D ☐ DELETE

NAME MCDONALD, PENNY  
STREET ADDRESS 12746 115TH ST N  
CITY-ST-ZIP LARGO FL 33778

TITLE D ☒ DELETE

NAME MANN, MARY R  
STREET ADDRESS 815 ELDORDA AVE.  
CITY-ST-ZIP CLEARWATER FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

D

CARSON CHRISTMAN  
11911 66th St. N # 116  
LARGO FL 33773

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

D

JUNE SMITH  
7825 54th AVE N # 319  
ST. PETERSBURG FL 33710

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

D

MARY MANN BOHLHOFF  
11925 OTERO COURT #240  
SEMINOLE FL 33772

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)