2002 UNIFORM BUSINESS REPORT (UBR)

Jan 27, 2002 8:00 am Secretary of State **DOCUMENT # 715427** 1. Entity Name 01-27-2002 90040 005 ****61.25 BETHANY HOUSING, INC. Mailing Address Principal Place of Business 880 OLEANDER WAY SOUTH 880 OLEANDER WAY SOUTH SAINT PETERSBURG FL 33707 SAINT PETERSBURG FL 33707 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1361375 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) RENFROW, ROBERT P. 5858 CENTRAL AVE. ST PETERSBURG FL 33707 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <u> 590,4 5 2 1 1</u> OFFICERS AND DIRECTORS 11. 10. (9/01)☐ Addition Change VP: :: TITLE ☐ Delete TITLE Time BROWN STREET N NAME NAME BROWN, JUNE STREET ADDRESS STREET ADDRESS 6822 22ND AVE., NORTH #113 ERSBURG FL 33710 CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33710 Addition Change Delete TITLE TITLE 94 STREET N #812 FLEMING, BEA NAME NAME STREET ADDRESS STREET ADDRESS 6565 5TH AVE S FL 33716 CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG-FL-33707 - - -**Addition** ☐ Change ☐ Delete TITLE TITLE DEAN VANDERWOODE NAME HOFMEYER, GARY R NAME 4975 COBIA DR. 36 "8" STREET ADDRESS STREET ADDRESS 6036 2ND AVE., NO CITY-ST-ZIP CITY.-ST-ZIP ST. PETERSBURG FL Change Addition TITLE ☐ Delete TITLE DICK ELZERMN KRAS, RANDALL NAME 14th AVENUE NAME STREET ADDRESS STREET ADDRESS 660 62ND ST S PALMETTO 34221 CITY-ST-ZIP CITY-ST-ZIP SAINT PETERSBURG FL 33707 M Addition Change ☐ Delete TITLE MARIE KRAS DELORY, MICHAEL SR NAME NAME STREET ADDRESS 1907 58TH ST S STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GULFPORT FL 33707** TITLE Change Addition ☐ Delete TITLE KIMMET, RICHARD NAME NAME STREET ADDRESS STREET ADDRESS | 7300 SUN ISLAND DR S #1002 CITY-ST-ZIP CITY-ST-ZIP S PASADENA FL 33707

FILED

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE