


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 715427</b> 1. Entity Name <b>BETHANY HOUSING, INC.</b>	
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Principal Place of Business <b>880 OLEANDER WAY SOUTH SAINT PETERSBURG, FL 33707</b>	Mailing Address <b>880 OLEANDER WAY SOUTH SAINT PETERSBURG, FL 33707</b>
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07142006 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>59-1361375</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>RAHDERT, GEORGE 535 CENTRAL AVE. ST PETERSBURG, FL 33707</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

<b>Filing Fee is \$61.25 Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>U000000572216 07/25/06-80020-007 61.25</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRES HOFMEYER, GARY 6026 2ND AVE NO. SAINT PETERSBURG, FL 33710</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V.P. KING, ANDREW 6740 PARK ST. SO. SO. PASADENA, FL 33707</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S/T RODRIGUEZ, IDALMIS 6740 PARK ST. SO. SO. PASADENA, FL 33707</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/19/06** **127-209-1020**  
Date Daytime Phone #

**et. 238**

*Gary Hofmeyer*