

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721940

FILED
Feb 13, 2012
Secretary of State

Entity Name: CATHOLIC CHARITIES HOUSING ASSOCIATION OF JACKSONVILLE, INC.

Current Principal Place of Business:

PROVIDENCE CENTER
134 E CHURCH ST
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

ALMA C. BALLARD
134 E CHURCH ST
JACKSONVILLE, FL 32202 US

New Mailing Address:

FEI Number: 59-1830079 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOOS, WILLIAM J
231 E ADAMS STREET
JACKSONVILLE, FL 32202 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: P
Name: BELSON, LLOYD
Address: 2135 ANNISTON ROAD
City-St-Zip: JACKSONVILLE, FL 32246

Title: VP
Name: ROBSON, SALLY
Address: 2916 REMINGTON STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: ST
Name: BALLARD, ALMA C
Address: 134 EAST CHURCH STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: HICKEY, LAURA
Address: 134 EAST CHURCH STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: D
Name: DAMATO, WILLIAM
Address: 7801 POINT MEADOWS DRIVE, #2404
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: FOWLER, HOLLIS JR
Address: 8739 RICARDO LANE
City-St-Zip: JACKSONVILLE, FL 32216

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: ALMA C BALLARD

S/T

02/13/2012

Electronic Signature of Signing Officer or Director

Date