

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724539

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: ANCHOR HOUSE, INC. OF POLK COUNTY

## Current Principal Place of Business:

3000 K-VILLE AVENUE  
AUBURNDALE, FL 33823 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 625  
AUBURNDALE, FL 33823 US

## New Mailing Address:

FEI Number: 23-7244302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIVERA, MARK  
903 VAN DRIVE  
AUBURNDALE, FL 33823 US

## Name and Address of New Registered Agent:

RIVERA, MARK  
P.O. BOX 1754  
EATON PARK, FL 33840 US

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:

01/06/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DT ( ) Delete  
Name: HEBERT, ROBERT  
Address: 1419 ESTON DR  
City-St-Zip: LAKELAND, FL 33803

Title: DED ( ) Delete  
Name: RIVERA, MARK A.,  
Address: 903 VAN DRIVE  
City-St-Zip: AUBURNDALE, FL

Title: BDM ( ) Delete  
Name: SALVATO, MICHAEL M.D.  
Address: 1703 PALMETTO  
City-St-Zip: PLANT CITY, FL 33567

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: SALVATO, MICHAEL M.D.  
Address: 1703 PALMETTO  
City-St-Zip: PLANT CITY, FL 33567

Title: DED (X) Change ( ) Addition  
Name: RIVERA, MARK A.,  
Address: P.O. BOX 1754  
City-St-Zip: EATON PARK, FL 33840

Title: BDM (X) Change ( ) Addition  
Name: KITE-POWELL, RUFUS CANON  
Address: 1520 TIPPICANOE  
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MARK A. RIVERA

DED

01/06/2005

Electronic Signature of Signing Officer or Director

Date