

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 743391

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** CARVER HEIGHTS SENIOR CITIZENS INCORPORATED

**Current Principal Place of Business:**

407 SW FOURTH ST  
HAVANA, FL 32333 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2506  
HAVANA, FL 32333 US

**New Mailing Address:**

**FEI Number:** 59-0285460

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NORWOOD, DONALD E  
308 RED FERN ROAD  
HAVANA, FL 32333 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: S  
Name: CHAMBERS, ELLA  
Address: 629 GIBSON ROAD  
City-St-Zip: HAVANA, FL 32333

Title: D  
Name: NORWOOD, DONALD E  
Address: 308 RED FERN ROAD  
City-St-Zip: HAVANA, FL 32333

Title: D  
Name: BYRD, MACK  
Address: 4TH STREET S.E.  
City-St-Zip: HAVANA, FL 32333

Title: P  
Name: BOWERS, LUELLA  
Address: P.O. BOX 936  
City-St-Zip: QUINCY, FL 32351

Title: D  
Name: KEMP, BERTHA  
Address: 129 TYRE ROAD  
City-St-Zip: HAVANA, FL 32333 US

Title: D  
Name: JACKSON, CARL  
Address: 903 SOUTH MAIN STREET  
City-St-Zip: HAVANA, FL 32333 US

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: DONALD NORWOOD

MR.

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date