

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746914

FILED  
May 06, 2008  
Secretary of State

**Entity Name:** TAMPA NAPFE ELDERLY HOUSING DEVELOPMENT INCORPORATED

**Current Principal Place of Business:**

1628 11TH STREET N W  
WASHINGTON, DC 200015086

**New Principal Place of Business:**

**Current Mailing Address:**

1628 11TH STREET N W  
WASHINGTON, DC 200015086

**New Mailing Address:**

**FEI Number:** 59-2038676      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SAMPSON, LISA  
11113 N NEBRASKA AVE  
TAMPA, FL 336125746 US

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

CURRY, KAREN F  
11113 N NEBRASKA AVE  
TAMPA, FL 336125746 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: KAREN F CURRY

05/06/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCGEE, JAMES M  
Address: 1628 11TH STREET N W  
City-St-Zip: WASHINGTON, DC 200015086

Title: V ( ) Delete  
Name: DENSON, CHARLES J JR  
Address: 1628 11TH STREET N W  
City-St-Zip: WASHINGTON, DC 200015086 02

Title: S ( ) Delete  
Name: CAGE, DAVID A  
Address: 1628 11TH STREET N W  
City-St-Zip: WASHINGTON, DC 200015086 02

Title: T ( ) Delete  
Name: POWELL, WARREN E  
Address: 1628 11TH STREET N W  
City-St-Zip: WASHINGTON, DC 200015086 02

Title: D ( ) Delete  
Name: GRANT, WILLIE J  
Address: 3214 E HANNA AVE  
City-St-Zip: TAMPA, FL 336103643

Title: D ( ) Delete  
Name: SHERMAN, WILLIAM L JR  
Address: 8224 GUMWOOD DR  
City-St-Zip: TAMPA, FL 336197146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: SAMPSON, LISA B  
Address: 13901 N FLORIDA AVE APT D57  
City-St-Zip: TAMPA, FL 336133252

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JAMES M MCGEE

PRES

05/06/2008

Electronic Signature of Signing Officer or Director

Date