

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 20, 2011
Secretary of State

DOCUMENT# 753971

Entity Name: ST. FRANCIS HOUSE, INC.**Current Principal Place of Business:**413 S MAIN ST
GAINESVILLE, FL 32601 US**New Principal Place of Business:****Current Mailing Address:**P O BOX 12491
P.O. BOX 12491
GAINESVILLE, FL 32604 US**New Mailing Address:**P.O. BOX 12491
GAINESVILLE, FL 32604**FEI Number:** 59-1978981**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STINSON, KIRSTIN J ESQ.
ONE S.E. FIRST AVENUE
GAINESVILLE, FL 32601 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: PD
Name: COCKRELL, AL
Address: 3411 NW 32ND DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: VD
Name: VYVERBERG, FRED
Address: 2104 NW 102ND WAY
City-St-Zip: GAINESVILLE, FL 32606

Title: SD
Name: ROSENBAUM, WALTER
Address: 1521 NW 68TH TER
City-St-Zip: GAINESVILLE, FL 32605

Title: TD
Name: ELLIS, GEORGIANN
Address: 1417 SW 90TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: DIR
Name: VANN, KENT
Address: 413 SOUTH MAIN STREET
City-St-Zip: GAINESVILLE, FL 32601

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: KENT VANN

DIR

01/20/2011

Electronic Signature of Signing Officer or Director

Date