

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 09, 2002 8:00 am**  
**Secretary of State**  
 05-09-2002 90059 031 \*\*\*\*61.25

**DOCUMENT # 763119**

1. Entity Name

**THE DIOCESAN HOUSING BUREAU, INC.**

Principal Place of Business

Mailing Address

**PROVIDENCE CENTER  
 134 E. CHURCH ST.  
 JACKSONVILLE FL 32202  
 US**

**BONNA, SANDRA B  
 134 E. CHURCH ST.  
 JACKSONVILLE FL 32202  
 US**

2. Principal Place of Business

3. Mailing Address

**Alma C. Ballard**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**134 E Church St**

City & State

City & State

**Jacksonville FL**

Zip

Country

Zip

Country

**32202**

**US**

4. FEI Number

**59-2210204**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JOOS, WILLIAM J  
 231 EAST ADAMS STREET  
 JACKSONVILLE FL 32202**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete  
 NAME **ROBSON, SALLY**  
 STREET ADDRESS **150 E FIRST STREET**  
 CITY-ST-ZIP **JACKSONVILLE FL 32206**

TITLE **S/T** ☐ Change ☒ Addition  
 NAME **Ballard, Alma C.**  
 STREET ADDRESS **134 E Church Street**  
 CITY-ST-ZIP **Jacksonville FL 32202**

TITLE **D** ☐ Delete  
 NAME **GLOCKER, WILLIAM**  
 STREET ADDRESS **ONE INDEPENDENT DR STE 2000**  
 CITY-ST-ZIP **JACKSONVILLE FL 32202**

TITLE **V** ☒ Change ☐ Addition  
 NAME **Yates, Alton W.**  
 STREET ADDRESS **2923 Ribault Scenic Drive**  
 CITY-ST-ZIP **Jacksonville FL 32208**

TITLE **STD** ☒ Delete  
 NAME **BONNA, SANDRA B**  
 STREET ADDRESS **134 E CHURCH ST**  
 CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **P** ☒ Change ☐ Addition  
 NAME **Belson, Lloyd**  
 STREET ADDRESS **2135 Anniston Road**  
 CITY-ST-ZIP **Jacksonville FL 32246**

TITLE **D** ☐ Delete  
 NAME **CODY, THOMAS R**  
 STREET ADDRESS **3383 UNIVERSITY BLVD., NORTH**  
 CITY-ST-ZIP **JACKSONVILLE FL 32211**

TITLE **D** ☒ Change ☐ Addition  
 NAME **Swan, Nadine**  
 STREET ADDRESS **740 Selva Lakes Circle**  
 CITY-ST-ZIP **Atlantic Beach FL 32233**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**Alma C. Ballard**

**4-24-02**

**904-632-1255**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

# Attachment

Attachment to 2002 Uniform Business Report (UBR)  
Document #763119  
The Diocesan Housing Bureau, Inc. (Hurley Manor II)

# 763119  
787320

D  
Fowler, Hollis, Jr.  
8739 Ricardo Lane  
Jacksonville FL 32216

D  
Tierney, William J.  
P. O. Box 24000  
Jacksonville FL 32241-4000

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D  
Damato, William  
1763 Ravine Side Drive  
Jacksonville FL 32225

D  
Motsett, C. B. (Cork)  
4458 Barrington Oaks  
Jacksonville FL 32257

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