## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#763649** 

Apr 15, 2004 Secretary of State

Entity Name: HOUSING FOR THE HANDICAPPED OF ALACHUA COUNTY, INCORPORATED

**Current Principal Place of Business:** New Principal Place of Business:

3303 NW 83 ST 3303 NW 83 ST

PO BOX 2919 GAINESVILLE, FL 32606 GAINESVILLE, FL 32602

**New Mailing Address: Current Mailing Address:** 

3303 NW 83RD ST 3303 NW 83RD ST

US

PO BOX 2919 GAINESVILLE, FL 32606 US

FEI Number: 59-2217411 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRADLEY, RICHARD 3303 NW 83 ST

GAINESVILLE, FL 32606

GAINESVILLE, FL 32606 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition () Delete

STOCKMAN, DAVID WALKER, MARK Name: Name: 20721 SW 46TH AVE Address: P.O. BOX 358290 Address: City-St-Zip: NEWBERRY, FL 32669 City-St-Zip: GAINESVILLE, FL 32635

Title: PD () Delete Title: (X) Change ( ) Addition MEYROWITZ, RAYMOND Name: DROTOS, RON Name:

Address: **BOX 114 TURKEY CREEK** Address: 10223 SW 49TH LANE City-St-Zip: ALACHUA, FL 32615 City-St-Zip: GAINESVILLE, FL 32608

Title: () Delete Title: (X) Change ( ) Addition

CONROY, MAUREEN COSTELLO, CATHY Name: Name: Address: 516 NE 4 ST Address: 2525 NW 19TH WAY City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32605

Title: SD ( ) Delete Title: (X) Change ( ) Addition

Name: CONROY, MAUREEN Name: STOCKMAN, DAVID Address: 516 NE 4TH STREET Address: 912 SW 126TH STREET City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: NEWBERRY, FL 32669

Title: () Delete Title: (X) Change ( ) Addition

COSTELLO, CATHY MEYROWITZ, RAYMOND Name: Name: 2525 NW 19TH WAY 9432 SW 31ST LANE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: GAINESVILLE, FL 32608

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: RON DROTOS **VP** 04/15/2004