

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763822

1. Entity Name

ST. MICHAEL'S HOUSING, INC.

Principal Place of Business

2285 SR 580  
CLEARWATER FL 34623-1111  
US

Mailing Address

28100 US HWY 19 N  
SUITE 504  
CLEARWATER FL 33761-2686

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2312821

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DMITO, JOSEPH A  
4514 CENTRAL AVE  
ST PETERSBURG FL 33711

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
SOROTA, JOSEPH, JR  
28100 US HWY 19 N #504  
CLEARWATER, FL 00000 33761-2686

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPD  
LEWIS, TOM  
2854 RAMPART CIRCLE  
CLEARWATER FL

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ATD  
MALINS-SMITH, CAMILLE  
2303 REPUBLIC DRIVE  
PALM HARBOR FL

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Vice-President - Director  
Malins-Smith, Camille  
2303 Republic Drive  
Palm Harbor, FL 34683

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
COOKE, COLMAN  
2281 STATE RD 580  
CLEARWATER FL 34623 33763

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ASD  
LARSON, SHARON N  
2281 STATE RD 580  
CLEARWATER FL 33763

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ATD  
SPAIN, HILLERY D  
2284 PHILIPPINE PARK #71  
CLEARWATER FL 34623

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Asst. Treasurer-Director  
Sharron Bauer  
2203 Stacy Court S.  
Palm Harbor, FL 34683

☐ Change ☒ Addition

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:

*Joseph A. DMITO*

3/8/2000

(727) 796-1557

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)