2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # 763822

1. Entity Name
ST. MICHAEL'S HOUSING, INC.

Principal Place of Business	Mailing Address
2285 SR 580 CLEARWATER, FL 33763-1111 US	28100 US HWY 19 N SUITE 504 CLEARWATER, FL 33761-2686

01192006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2312821
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DIVITO, JOSEPH A
4514 CENTRAL AVE
ST PETERSBURG, FL 33711

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	SOROTA, JOSEPH, JR
STREET ADDRESS	28100 US HWY 19 N #504
CITY-ST-ZIP	CLEARWATER, FL 337612686
TITLE	VD
NAME	MALINS-SMITH, CAMILLE
STREET ADDRESS	2303 REPUBLIC DRIVE
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	PD
NAME	COOKE, COLMAN
STREET ADDRESS	2281 STATE RD 580
CITY-ST-ZIP	CLEARWATER, FL 33763
TITLE	D
NAME	FASSNACHT, GERALD
STREET ADDRESS	1009 ROUNDSTONE PLACE
CITY-ST-ZIP	PALM HARBOR, FL 34683
TITLE	ATD
NAME	BAUER, SHARRON
STREET ADDRESS	2215 TONIWOOD LANE
CITY-ST-ZIP	PALM HARBOR, FL 34685
TITLE	ATD
NAME	RIDENOUR, NANCY
STREET ADDRESS	2919 WICOMBE WAY
CITY-ST-ZIP	PALM HARBOR, FL 34685

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01/30/06-80022-009 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 J. Sorota Jr. Joseph J. Sorota Jr. Secr. 01/20/06 727-796-1557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #