

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768993

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** SAFE HOUSE, INC.

**Current Principal Place of Business:**

2114 INDIAN AVE N  
NONE  
BELLEAIR BLUFFS, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1472  
LARGO, FL 33779 US

**New Mailing Address:**

**FEI Number:** 59-2388779

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALMQUIST, AL  
2114 INDIAN AVE N  
BELLEAIR BLUFFS, FL 33770 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: PALMQUIST, AL  
Address: 2114 INDIAN AVE N  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD  
Name: MCCUTCHEN, JOE  
Address: 185 MILLCREST DR  
City-St-Zip: COVINGTON, GA 30016

Title: SD  
Name: HOPE, KENNETH  
Address: 1015 SANDY TERRACE CT  
City-St-Zip: PORT ORANGE, FL

Title: T  
Name: PALMQUIST, GAYLE  
Address: 2114 INDIAN AVE N  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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:** ALLEN PALMQUIST

PRES

03/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date