

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004640

FILED  
Mar 06, 2006  
Secretary of State

**Entity Name:** TREASURE COAST HOMELESS SERVICES COUNCIL, INC.

**Current Principal Place of Business:**

2525 ST LUCIE AVENUE  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

2525 ST LUCIE AVENUE  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 52-2254571

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUBBARD, LOUISE S  
2525 ST. LUCIE AVE.  
VERO BEACH, FL 32960 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: C ( ) Delete  
Name: STARK, RICHARD A  
Address: 340 PALMETTO PT.  
City-St-Zip: VERO BEACH, FL 32963 US

Title: P ( ) Delete  
Name: BLOCK, JACELYN  
Address: 1277 W. ISLAND CLUB SQUARE  
City-St-Zip: VERO BEACH, FL 32963

Title: V ( ) Delete  
Name: JOHNSTON-CARLSON, JOYCE  
Address: 1840 25TH ST.  
City-St-Zip: VERO BEACH, FL 32960

Title: T ( ) Delete  
Name: BAUCHMAN, BOB  
Address: 460 SANDFLY LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: S ( ) Delete  
Name: BIRD, DANIEL  
Address: 1224 RIVER REACH DRIVE  
City-St-Zip: VERO BEACH, FL 32967

Title: D ( ) Delete  
Name: HUBBARD, LOUISE  
Address: 2525 ST. LUCIE AVENUE  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ROMANO, JOHN  
Address: 4500 W. MIDWAY ROAD  
City-St-Zip: FORT PIERCE, FL 34981

Title: P (X) Change ( ) Addition  
Name: JOHNSTON-CARLSON, JOYCE  
Address: 485 NIEUPORT DR.  
City-St-Zip: VERO BEACH, FL 32968

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: COCOVES, ANITA  
Address: 472 S.E. EDGEWOOD DRIVE  
City-St-Zip: STUART, FL 34996

Title: V (X) Change ( ) Addition  
Name: HUBBARD, LOUISE  
Address: 2525 ST. LUCIE AVENUE  
City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: LOUISE HUBBARD

V

03/06/2006

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

\_\_\_\_\_  
Date