

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005356

FILED  
Mar 21, 2005  
Secretary of State

**Entity Name:** TRI COUNTY HOUSING SERVICES CORP.

**Current Principal Place of Business:**

12865 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

3001 CEDORA TERR  
SEBRING, FL 33870

**Current Mailing Address:**

12865 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161

**New Mailing Address:**

3001 CEDORA TERRACE  
SEBRING, FL 33870

**FEI Number:** 65-1036591

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOLLAND, FRANK  
12865 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161 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: D ( ) Delete  
Name: MEE, DENNIS  
Address: 12927 BANYAN ROAD  
City-St-Zip: NORTH MIAMI, FL 33181

Title: D ( ) Delete  
Name: STEPHENSON, DIANA  
Address: 10160 OLEANDER COURT  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: SCHWARTZBAUM, STEVEN  
Address: 1940 NORTHEAST 124TH STREET  
City-St-Zip: NORTH MIAMI, FL 33161

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

Title: D (X) Change ( ) Addition  
Name: MEE, DENNIS  
Address: 3001 CEDORA TERRACE  
City-St-Zip: SEBRING, FL 33870

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

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

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: DENNIS K MEE

D

03/21/2005

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

\_\_\_\_\_  
Date