

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00600

**FILED**  
**Mar 16, 2010**  
**Secretary of State**

**Entity Name:** LARGO AREA HOUSING DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

2139 NE COACHMAN RD - SUITE #1  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

2139 NE COACHMAN RD - SUITE #1  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 59-2355317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TIEMAN, L D  
1120 KINGSLEY ST  
CLEARWATER, FL 33759 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: TIEMAN, DUKE L  
Address: 650 MAIN STREET  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VD  
Name: BRICKLEY, PAM  
Address: 2464 W. GRANDA CIR S  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: SD  
Name: MCCONNELL, DARLENE  
Address: 710 CARILLON PARKWAY  
City-St-Zip: ST. PETE, FL 33773

Title: TD  
Name: FURNELL, LISA  
Address: 710 CARILLON PKWY  
City-St-Zip: ST. PETE, FL 33773

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: L.DUKE TIEMAN

P

03/16/2010

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

\_\_\_\_\_  
Date