

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002684

FILED
Jan 11, 2008
Secretary of State

Entity Name: PUNTA GORDA HOUSING AUTHORITY RESIDENT COUNCIL, INC.

Current Principal Place of Business:

414 E CHARLOTTE AVE
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

414 E CHARLOTTE AVE
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 65-1104278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARINO, JEAN
414 E CHARLOTTE AVENUE
PUNTA GORDA, FL 33951 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 () Delete
Name: MYERS, PATRICIA T
Address: 406 E. CHARLOTTE AVE.
City-St-Zip: PUNTA GORDA, FL 33950

Title: SD () Delete
Name: MYERS, PATRICE
Address: 406 E. CHARLOTTE AVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD () Delete
Name: DAVIS, PHILLIP
Address: 412 E CHARLOTTE AVE
City-St-Zip: PUNTA GORDA, FL 33950

Title: D () Delete
Name: O'BRISKI, JOSEPHINE
Address: 734 HAZEL ST.
City-St-Zip: PUNTA GORDA, FL 33950

Title: D (X) Delete
Name: HAYES, GWEN
Address: 414 FITZHUGH AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: O'BRISKI, JOSEPHINE
Address: 416 FITZHUGH AVENUE
City-St-Zip: PUNTA GORDA, FL 33950

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

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA MYERS

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date