2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02482

Entity Name: U.P.A.R.C. HOUSING, INC.

FILED May 01, 2009 Secretary of State

1501 N. BELCHER ROAD 1501 N. BELCHER ROAD

CLEARWATER, FL 33765 249

CLEARWATER, FL 33765

Current Mailing Address: New Mailing Address:

1501 N. BELCHER ROAD CLEARWATER, FL 33765 1501 N. BELCHER ROAD 249 CLEARWATER, FL 33765

FEI Number: 59-2394285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BUCKLEY, THOMAS J 1501 N. BELCHER ROAD CLEARWATER, FL 33765 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Title: T () Delete Title: P (X) Change () Addition

 Name:
 LEWIS, MICHAEL
 Name:
 STOCK, GREGORY

 Address:
 1733 PINE CRK CT
 Address:
 P.O. BOX 1038

City-St-Zip: SAFETY HARBOR, FL City-St-Zip: CRYSTAL BCH, FL 34681

Name: SMITH, MARION Name: GRIFFIN, RYAN Address: 1884 OAKDALE LANE Address: PO BOX 1368

City-St-Zip: CLEARWATER, FL City-St-Zip: CLEARWATER, FL 33757

Title: S () Delete Title: () Change () Addition

 Name:
 BUCKLEY, THOMAS
 Name:

 Address:
 6402 BROOK HOLLOW CT
 Address:

Address. 6402 BROOK HOLLOW C1 Address.

City-St-Zip: TAMPA, FL City-St-Zip:

Title: D () Delete Title: T (X) Change () Addition

Name: GAMBLE, CHARLES Name: KINNEY, ROBERT

Address: 1722 HICKORY GATE DR S. Address: 6325 RIDGE TOP DR
City-St-Zip: DUNEDIN, FL City-St-Zip: NEW PORT RICHEY, FL 34655

 Title:
 D
 (X) Delete
 Title:

 Name:
 JAMIESON, HARRY
 Name:

 Address:
 301 JASMINE WAY
 Address:

 City-St-Zip:
 CLEARWATER, FL
 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: THOMAS J. BUCKLEY S 05/01/2009