

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000138

FILED
Jan 19, 2007
Secretary of State

Entity Name: HIGHLANDS COUNTY COALITION FOR THE HOMELESS, INC.

Current Principal Place of Business:

501 S. COMMERCE AVENUE
SEBRING, FL 33870

New Principal Place of Business:

Current Mailing Address:

501 S. COMMERCE AVENUE
SEBRING, FL 33870

New Mailing Address:

FEI Number: 51-0466286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

REINHARDT, RICHARD J
501 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 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: RICHARD J REINHARDT

01/19/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PHILLIPPI, PENNY
Address: 117 PLUMOSA AVE.
City-St-Zip: LAKE PLACID, FL 33852

Title: VPDP () Delete
Name: REINHARDT, RUDY
Address: 1200 W. AVON BLVD., ROOM 109
City-St-Zip: AVON PARK, FL 33825

Title: SD () Delete
Name: HALL, SUSAN
Address: 7205 S. GEORGE BLVD.
City-St-Zip: SEBRING, FL 33875

Title: TD () Delete
Name: MIRANDA, CARMEN
Address: 501 S COMMERCE AVE.
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JENKINS, HOWARD
Address: 518 WEST LAKE WALES ROAD NORTH
City-St-Zip: LAKE WALES, FL 33859

Title: VP (X) Change () Addition
Name: COOK, BARBARA
Address: 155 US HWY 27 NORTH SUITE 2
City-St-Zip: SEBRING, FL 33870

Title: SD (X) Change () Addition
Name: SHOEMAN, LARRY
Address: 406 TULANE DRIVE
City-St-Zip: AVON PARK, FL 33825

Title: TD (X) Change () Addition
Name: OLDHAM, ALICE
Address: 6018 MANTANZAS DRIVE
City-St-Zip: SEBRING, FL 33872

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: RICHARD J REINHARDT

ED

01/19/2007

Electronic Signature of Signing Officer or Director

Date