

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009859

FILED
Mar 28, 2009
Secretary of State

Entity Name: THE JEFFERY A. MASSEY FLORIDA IOTA HOUSING CORPORATION

Current Principal Place of Business:

12108 DARWIN DRIVE
ORLANDO, FL 32826 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5306
WINTER PARK, FL 32792 US

New Mailing Address:

FEI Number: 16-1716124 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROBINSON, SHAWN H
5460 FIELDSTONE DR
LAKELAND, FL 33809 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: P () Delete
Name: SPYCHALSKY, JOE
Address: 884 PEMBROKE AVENUE NE
City-St-Zip: PALM BAY, FL 32907 US

Title: VP () Delete
Name: BARRETT, JOHNSON
Address: 806 EMERALD LANE
City-St-Zip: ORLANDO, FL 32801 US

Title: T () Delete
Name: SPYCHALSKY, BOB
Address: 8319 MAID MARION'S TRAIL
City-St-Zip: LAKELAND, FL 33809 US

Title: D () Delete
Name: BILL, BARTO
Address: 1652 VICTORIA WAY
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D () Delete
Name: MEHLER, ROBERT
Address: 1336 ANDES DR.
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: D () Delete
Name: ROBINSON, SHAWN
Address: 5460 FIELDSTONE DR
City-St-Zip: ORLANDO, FL 33809 US

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

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

Title: D (X) Change () Addition
Name: ROBINSON, SHAWN H
Address: 5460 FIELDSTONE DR
City-St-Zip: ORLANDO, FL 33809 US

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: SHAWN H ROBINSON

D

03/28/2009

Electronic Signature of Signing Officer or Director

Date