

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000709

FILED  
Apr 05, 2009  
Secretary of State

**Entity Name:** DISABILITY HOUSING INITIATIVE OF PALM BEACH, INC.

**Current Principal Place of Business:**

4037 DAVIS ROAD  
SUITE 10  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

7331 CRILL AVE  
SUITE 10  
PALATKA, FL 32177

**Current Mailing Address:**

4037 DAVIS ROAD  
SUITE 10  
LAKE WORTH, FL 33461

**New Mailing Address:**

7331 CRILL AVE  
SUITE 10  
PALATKA, FL 32177

**FEI Number:** 65-1195135

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAYES, CHRIS  
172 JAMAICA DRIVE  
PALM SPRINGS, FL 33461 US

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

HAYES, CHRIS  
7331 CRILL AVE  
SUITE 10  
PALATKA, FL 32177 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: CHRIS HAYES

04/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: HAYES, CHRIS  
Address: 4037, DAVIS ROAD  
City-St-Zip: LAKE WORTH, FL 33461

Title: D (X) Delete  
Name: KOSS, SUSAN  
Address: 4680 DAVIS ROAD  
City-St-Zip: LAKE WORTH, FL 33461

Title: D (X) Delete  
Name: FERNANDEZ, MICHELE  
Address: 4754 FOX HUNT TRAIL  
City-St-Zip: BOCA RATON, FL 33487

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPST (X) Change ( ) Addition  
Name: HAYES, CHRIS  
Address: 7331 CRILL AVE, SUITE 10  
City-St-Zip: PALATKA, FL 32177

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

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: CHRIS HAYES

D

04/05/2009

Electronic Signature of Signing Officer or Director

Date