## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000008352

FILED Jul 02, 2007 Secretary of State

Entity Name: HOMELESS FAMILY CENTER FOUNDATION, INC.

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
720 4THH STREET VERO BEACH, FL 32962			720 4TH STREET VERO BEACH, FL 32962	
Current Mailing Address:		New Maili	New Mailing Address:	
720 4THH STREET VERO BEACH, FL 32962			720 4TH STREET VERO BEACH, FL 32962	
	s. 607.193(2)(b), F.S., the corporation did not re		ee.	
lame and Addi	ress of Current Registered Agent:	Name and	Address of New Registered Agent:	
C/O THOMAS W	WY A-1-A STE 200			
		pose of changing	its registered office or registered agent, or both,	
n the State of Flo		pose of changing	its registered office or registered agent, or both,	
n the State of Flo			its registered office or registered agent, or both,  Date	
The above name n the State of Flo BIGNATURE:  —  DFFICERS AND	orida. Électronic Signature of Registered Agent			
n the State of Floor SIGNATURE:  DFFICERS AND Title: Name: Nddress:	orida. Électronic Signature of Registered Agent		Date	
n the State of Flo	orida.  Electronic Signature of Registered Agent  DIRECTORS:	ADDITION Title: Name: Address:	Date  IS/CHANGES TO OFFICERS AND DIRECTOR  MR. ( ) Change (X) Addition TIERNEY, THOMAS W PRES. 6755 4TH STREET	
n the State of Flo BIGNATURE:	Electronic Signature of Registered Agent  DIRECTORS:  ( ) Delete	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date  IS/CHANGES TO OFFICERS AND DIRECTOR  MR. ( ) Change (X) Addition TIERNEY, THOMAS W PRES. 6755 4TH STREET VERO BEACH, FL 32968  MR. ( ) Change (X) Addition TROXELL, WILLIAM V. PRES 916 ORCHID POINT WAY	

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 W. TIERNEY PRES 07/02/2007