

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007954

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** GHETTREAL COMMUNITY SERVICES, INC.

**Current Principal Place of Business:**

3940 18 AVE S  
SAINT PETERSBURG, FL 33711

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 530356  
SAINT PETERSBURG, FL 33747

**New Mailing Address:**

**FEI Number:** 01-0861075

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOVETT, FOSTER CPA  
400 EAST MLK BLVD.  
SUITE 108  
TAMPA, FL 33603 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: PD  
Name: KICKLIGHTER, ALMA L  
Address: 2137 19TH STREET S.  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: VD  
Name: HEYWARD, TAMARIA  
Address: 2907 52ND AVE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D  
Name: KICKLIGHTER, HARRELL A  
Address: 4411 5TH AV SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33711

Title: TD  
Name: WILLIAMS, FRANCIS  
Address: 2201 25TH AVE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: TD  
Name: HUFF, EUGENE  
Address: 2176 CORRINE CT SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D  
Name: COLQUITT, CHARLE  
Address: 1820 SERPENTINE DR SOUTH  
City-St-Zip: ST PETERSBURG, FL 33712

I hereby 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 all other like empowered.

SIGNATURE: ALMA L. KICKLIGHTER

PD

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date