

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 12, 2010
Secretary of State

Entity Name: ST. LAWRENCE HOUSING II, INC.

Current Principal Place of Business:

5225 NORTH HIMES AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

5225 NORTH HIMES AVE
TAMPA, FL 33614

New Mailing Address:

FEI Number: 26-1540063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIVITO, JOSEPH A ESQ
C/O DIVITO & HIGHAM, P.A.
4514 CENTRAL AVENUE
ST. PETERSBURG, FL 33711 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: D
Name: MORGAN, THOMAS
Address: 5225 NORTH HIMES AVE
City-St-Zip: TAMPA, FL 33614

Title: S
Name: CALDEVILLA, RICHARD
Address: 1721 NORTH HOWARD AVE
City-St-Zip: TAMPA, FL 33607

Title: T
Name: WARD, PAUL A JR
Address: 564 W DAVIS BLVD
City-St-Zip: TAMPA, FL 33606

Title: VP
Name: MURPHY, FRANK
Address: 1213 16TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: BM
Name: KOCHU, PAUL REV
Address: 7851 54TH AVE. NO.
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: BM
Name: ANASTASIA, THOMAS REV
Address: 1104 NO ALEXANDER STREET
City-St-Zip: PLANT CITY, FL 33563

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: FRANK MURPHY

P

01/12/2010

Electronic Signature of Signing Officer or Director

Date