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Apr 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N20792 (0)

1. Corporation Name
MIAMI VOA ELDERLY HOUSING, INC.

Principal Place of Business	Mailing Address
11495 W. FLAGLER STREET MIAMI FL 33174 US	3939 N. CAUSEWAY BLVD. METAIRIE LA 70002-1777 US

3. Date Incorporated or Qualified: 05/22/1987
3a. Date of Last Report: 04/02/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 58-1777367 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes XX No

9. Name and Address of Current Registered Agent

C.T. CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	D	☐ Change XX Addition
NAME	NORMAN, JOHN H.		1.2 NAME	FASTERLING, CHARLES W.	
STREET ADDRESS	3100 DIVISION ST		1.3 STREET ADDRESS	2955 RIDGELAKE DR.	
CITY-ST-ZIP	METAIRIE LA		1.4 CITY-ST-ZIP	METAIRIE, LA. 70002	
TITLE	P	XX DELETE	2.1 TITLE	P/NVD	☐ Change XX Addition
NAME	HOOD, JOHN A.		2.2 NAME	GOULD, CHARLES W.	
STREET ADDRESS	3939 N. CAUSEWAY BLVD., SUITE 300		2.3 STREET ADDRESS	110 SO. UNION ST., 2ND FL.	
CITY-ST-ZIP	METAIRIE LA		2.4 CITY-ST-ZIP	ALEXANDRIA, VA. 22314	
TITLE	ST	XX DELETE	3.1 TITLE	S/T NVD	☐ Change XX Addition
NAME	POWELL, RICHARD J.		3.2 NAME	TURNBULL, THOMAS D.	
STREET ADDRESS	3939 N. CAUSEWAY BLVD., SUITE 300		3.3 STREET ADDRESS	110 SO.UNION ST. 2ND FL.	
CITY-ST-ZIP	METAIRIE LA		3.4 CITY-ST-ZIP	ALEXANDRIA, VA. 22314	
TITLE	D	XX DELETE	4.1 TITLE	VP/D	☐ Change XXX Addition
NAME	SCHILLING, WILLIAM C.		4.2 NAME	OSTER, RICHARD DR.	
STREET ADDRESS	4528 FOLSE DR.		4.3 STREET ADDRESS	931 SOLEDAD WAY	
CITY-ST-ZIP	METAIRIE LA		4.4 CITY-ST-ZIP	LADY LAKE, FL. 32159	
TITLE	D	XX DELETE	5.1 TITLE	D	☐ Change XX Addition
NAME	GALBREATH, RICHMOND B.		5.2 NAME	MILLS, CON C.	
STREET ADDRESS	500 BEAU CHENE DR		5.3 STREET ADDRESS	518 LEGENDRE DR.	
CITY-ST-ZIP	MANDEVILLE LA		5.4 CITY-ST-ZIP	SLIDELL, LA. 70460	
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change XX Addition
NAME			6.2 NAME	SOUDER, ROGER	
STREET ADDRESS			6.3 STREET ADDRESS	4175 RANDON RD.	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	FT. WORTH, TX 76140	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.