


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90305 047 ****61.25

| | | | | | |
|--|---|--|---|--|-----------------|
| DOCUMENT # N20793 | | | |  | |
| 1. Entity Name PINELLAS COUNTY VOA ELDERLY HOUSING, INC. | | | | | |
| Principal Place of Business 1335 PIERCE STREET CLEARWATER, FL 33756 US | | | Mailing Address VOA NATIONAL SERVICES 1660 DUKE ST ALEXANDRIA, VA 22314-3427 US | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | Country | Zip | Country | 01122005 Chg-NP CR2E037 (10/03) | |
| 4. FEI Number 58-1805631 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 | | | Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2005 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C FELDMAN, NANCY P.O. BOX 52 MINNEAPOLIS, MN 55440 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | (See a Handout) <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD SPILANE, MICHAEL 640 JACKSON ST SAINT PAUL, MN 55101 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PNVD GOULD, CHARLES 1660 DUKE ST ALEXANDRIA, VA 223143427 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D KNIGHT, GEORGE 2181 JAMIESON AVE # 1003 ALEXANDRIA, VA 22314 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD MOORE, CAROL 10400 EATON PL #105 FAIRFAX, VA 22030 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6031 Grove Dr Alexandria VA 22307 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ASAT PATTERSON, RON 7530 MARKET PLACE DRIVE EDEN PRAIRIE, MN 55344 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: <i>Ron Patterson</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | 2/23/15 | | 703.341.5000 |
| | | | Date | | Daytime Phone # |

ATTACHMENT

Pinellas County VOA Elderly Housing, Inc. Board of Directors

40030752

#N20793

Ms. Nancy Feldman
Chief Executive Officer
UCARE Minnesota
2000 Summer Street NE
Minneapolis, MN 55413

Ms. Carol Moore
Chesapeake Consulting, Inc.
6031 Grove Drive
Alexandria, VA 22307

Mr. Charles W. Gould (ex-officio)
President/CEO, Volunteers of America, Inc.
1660 Duke Street
Alexandria, VA 22314

Mr. Ron Patterson
Secretary/Treasurer
Volunteers of America National Services
1660 Duke St.
Alexandria, VA 22314

Mr. Gerard Holder
Executive Director, Commission on
Affordable Housing and Health Facility
Needs for Seniors in the 21st Century
2211 N. Tuckahoe Street
Arlington, VA 22205

Mr. Walter C. Patterson
9040 Roswell Rd.
Suite 106
Atlanta, GA 30350

Mr. C. David Kikumoto
Board Chair
President, Denver Management Advisors
6312 S. Fiddlers Green Circle
Suite 200E
Denver, CO 80111

Dr. Michael Spilane
Regions Hospital
640 Jackson Street
St. Paul, MN 55101

Mr. George Knight
Retired Executive Director
Neighborhood Reinvestment Corporation
Unit 1003
2181 Jamieson Avenue
Alexandria, VA 22314