

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26127

FILED
May 05, 2008
Secretary of State

Entity Name: HOMELESS COALITION OF POLK COUNTY, INC.

Current Principal Place of Business:

830 N KENTUCKY AVE
LAKELAND, FL 338011713

New Principal Place of Business:

Current Mailing Address:

830 N KENTUCKY AVE
LAKELAND, FL 338011713

New Mailing Address:

FEI Number: 59-2993564 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HURLBURT, ROBERT
835 N. KENTUCK AVE.
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

HURLBURT, ROBERT
830 N. KENTUCK AVE.
LAKELAND, FL 33801 US

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: _____

05/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENDERSON, JACQUELYN S
Address: PO BOX 218
City-St-Zip: LAKE HAMILTON, FL 33851

Title: TT (X) Delete
Name: FORD, THOMAS K CPA
Address: 811 EAST MAIN STREET
City-St-Zip: LAKELAND, FL 33801

Title: VPD () Delete
Name: SUMMERS, EVELYN V
Address: 140 EAST PARK AVE
City-St-Zip: LAKE WALES, FL 33853

Title: S () Delete
Name: REID-CLARK, CYNTHANIA
Address: 711 6TH STREET NW
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOHNSON, RICHARD
Address: 1836 N CRYSTAL LAKE DR #21
City-St-Zip: LAKELAND, FL 33801

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: RIHN, ROBERT
Address: 1815 CRYSTAL LAKE DR
City-St-Zip: LAKELAND, FL 33801

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RICHARD JOHNSON

P

05/05/2008

Electronic Signature of Signing Officer or Director

Date