

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90064 031 ****61.25

DOCUMENT # N28313

1. Entity Name

PARTNERS IN SELF-SUFFICIENCY, INC.



Principal Place of Business

Mailing Address

901 CHESTNUT STREET
SUITE E
CLEARWATER FL 33756
US

901 CHESTNUT STREET
SUITE E
CLEARWATER FL 33756
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2951437

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIVELLINI, KYM
1101 TURNER ST
CLEARWATER FL 33756

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Eugene William Moore

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 D ☒ Delete
NAME WILLIAMSON, STEVE, VICE CH
STREET ADDRESS 911 CHESTNUT ST
CITY-STATE-ZIP CLEARWATER FL 33756

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME RIVILLINI, KYM, CHAIR
STREET ADDRESS 1101 TURNER STREET
CITY-STATE-ZIP CLEARWATER FL 33756

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME MOORE, WILLIAM, TREAS
STREET ADDRESS 600 BYPASS DR, STE 223B
CITY-STATE-ZIP CLEARWATER FL 33764

TITLE ☒ Change ☐ Addition
NAME Chair
STREET ADDRESS Moore, William
CITY-STATE-ZIP

TITLE D ☐ Delete
NAME BETHEL, EVELYN, TREA
STREET ADDRESS 2189 CLEVELAND ST
CITY-STATE-ZIP CLEARWATER FL 33765

TITLE ☒ Change ☐ Addition
NAME Bethell, Evelyn
STREET ADDRESS 14320 Apache Ave.
CITY-STATE-ZIP Largo, FL 33774

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☒ Addition
NAME Garvey, Rita Vice Ch.
STREET ADDRESS 1530 Ridgewood St.
CITY-STATE-ZIP Clearwater FL 33755

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☒ Addition
NAME Favali, Abby
STREET ADDRESS 1050 Arbor Drive South
CITY-STATE-ZIP Palm Harbor FL 34683

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Eugene William Moore
Eugene William Moore (777) 445-7550
2/27/07