

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32609

Entity Name: ARBOR HOUSE, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

2618 NW 6 ST
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

PO BOX 12363
GAINESVILLE, FL 326047363

New Mailing Address:

FEI Number: 59-2941889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, RON
2236 NW 37TH PL
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

JERI, NICK
6324 NW 97TH CT
GAINESVILLE, FL 32653 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: JERI NICK

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: COLE, RON
Address: 2236 NW 37TH PL
City-St-Zip: GAINESVILLE, FL 32605

Title: TD () Delete
Name: CHAMBERS, JANET TREASUR
Address: 6807 SE 183RD PL
City-St-Zip: MICANOPY, FL 32667

Title: VPD () Delete
Name: HOARE, GEOFF
Address: 1618 NW 42 AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: NICK, JERRI
Address: 6324 NW 97TH CT
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: MASSIAS, MICHELLE
Address: 9784 SW 52ND RD
City-St-Zip: GAINESVILLE, FL 32608

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: EDWIN, GRISWOLD
Address: 8724 SW 98TH AVE
City-St-Zip: GAINESVILLE, FL 32608

Title: D (X) Change () Addition
Name: JUDY, CALLAHAN
Address: 8105 NE 56TH TERR
City-St-Zip: GAINESVILLE, FL 32609

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

Title: D () Change (X) Addition
Name: VONCEIL, LAVINE
Address: 2867 SW 38TH PLACE
City-St-Zip: GAINESVILLE, FL 32608

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: JERI NICK

D

04/20/2009

Electronic Signature of Signing Officer or Director

Date