FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED
95 MAY -1 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32968 (2)

1. Corporation Name
ADVOCATES FOR SHELTER/ACTION POLICY, INC.

Principal Place of Business	Mailing Address
PO BOX 3910 ST. PETERSBURG FL 33731-3910	PO BOX 3910 ST. PETERSBURG FL 33731-3910

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/26/1989
3a. Date of Last Report: 04/14/1994
4. FEI Number: 65-0132187 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ANDERSON, THOMAS L 9429 122ND AVE.,N. CLEARWATER FL	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 607.0502 and 607.1508, 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 607.0505, 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	C	11 TITLE	☐ Change ☒ Addition
NAME	ANDERSON, THOMAS L President	12 NAME	Liz Finch
STREET ADDRESS	9429 122ND AVE., N.	13 STREET ADDRESS	3095 54th Ave. S.
CITY-ST-ZIP	CLEARWATER FL	14 CITY-ST-ZIP	St. Petersburg, Fl 33712
TITLE	S	21 TITLE	☐ Change ☒ Addition
NAME	MALONE, JOAN Secretary	22 NAME	Gloria Gifford
STREET ADDRESS	5080 LOCUST ST., NE #223	23 STREET ADDRESS	4411 11th Ave. N
CITY-ST-ZIP	ST PETERSBURG FL	24 CITY-ST-ZIP	St. Petersburg, FL 33713
TITLE	T	31 TITLE	☐ Change ☒ Addition
NAME	DEGREGORY, HUGO Treasurer	32 NAME	Shirley Insoft
STREET ADDRESS	1630 58TH AVE.,S.	33 STREET ADDRESS	8069 13th Ave. So.
CITY-ST-ZIP	ST PETERSBURG FL	34 CITY-ST-ZIP	St. Petersburg, Fl 33707
TITLE	D	41 TITLE	☐ Change ☒ Addition
NAME	CRUTCHFIELD, COLEEN	42 NAME	Joy Parrish
STREET ADDRESS	1191 EDEN ISLE DR.	43 STREET ADDRESS	1 Beach Dr. SE #1806
CITY-ST-ZIP	ST PETERSBURG FL	44 CITY-ST-ZIP	St. Petersburg, Fl. 33701
TITLE	D	51 TITLE	☐ Change ☒ Addition
NAME	KELLMAN, AURORA	52 NAME	Anthony Russo 6200
STREET ADDRESS	4900 38TH WAY, SOUTH	53 STREET ADDRESS	Courtney Campbell C'swy #1100
CITY-ST-ZIP	ST. PETERSBURG FL	54 CITY-ST-ZIP	Tampa, Fl. 33607
TITLE	D	61 TITLE	D ☐ Change ☒ Addition
NAME	WILDA, DANIELLE	62 NAME	C. Bette Wimbish
STREET ADDRESS	4200 14TH LANE NE	63 STREET ADDRESS	7200 34th ST. So. Apt. 14B
CITY-ST-ZIP	ST PETERSBURG FL	64 CITY-ST-ZIP	St. Petersburg, Fl. 33711

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Hugo DeGregory 4.2.95 Treasurer 04-14-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date

0086609

N32968

Advocates for Shelter/Action Policy

Additional Directors

Bonnie Wolverton
220 Driftwood Dr., S.E.
St. Petersburg, Fl. 33705

Irving Kellman
4904 38th Way So.
St. Petersburg, Fl. 33711

Lucinda J. Durning
P. O. Box 1121