2001 UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2001 8:00 am Secretary of State **DOCUMENT # N40177** 1. Entity Name 03-19-2001 90027 022 ****61.25 THE HOUSING CORPORATION OF CHARLOTTE COUNTY, INC Principal Place of Business Mailing Address 18501 MURDOCK CIR 18501 MURDOCK CIR STE 303 STE 303 PORT CHARLOTTE FL 33948 PORT CHARLOTTE FL 33948 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0235017 Not Applicable Zip \$8.75 Additional Zip Country Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MILONAS, TASO M. 1819 MAIN ST STE 1100 SARASOTA FL 34236 City Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Department of State Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Change CR2E037 (10/00) DIRECTOR TITLE Delete TITLE Jarvis, Gloria WILLIAM SHERMAN NAME NAME 2271 AARON STREET, APT. D101 PO BOS 2138 SUN TRUST BNK -STREET ADDRESS STREET ADDRESS PORT CHARLOTTE, FL 33952 CITY-ST-ZIP CITY-ST-ZIP **SARASOTA FL 34230-5885** Addition DIRECTOR ☐ Change Delete TITLE TITLE OQUENDO, JANET NAME NAME GERALD TREMBLAY STREET ADDRESS 18500 MURDOCK CIR STREET ADDRESS 1373 JACANA COURT PUNTA GORDA, FL CITY-ST-ZIP 33950 CITY-ST-ZIF PORT CHARLOTTE FL 33948 Change TITLE ☐ Delete TITLE DIRECTOR - -PORTER, VICTORIA NAME JUDITH R. WILLIS 23187 MACLELLAN AVE. PORT CHARLOTTE, FL NAME 319 HARBOR BLVD STREET ADDRESS STREET ADDRESS PT CHARLOTTE FL 33954 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR P. DREW LISBY 527 WEST PALM AVE. ☐ Change Addition ☐ Delete TITLE TITLE POWELL, G DAVID NAME NAME' 1043 TROPICAL AVE STREET ADDRESS STREET ADDRESS PUNTA GORDA, FL PORT CHARLOTTE FL 33948 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR Change Addition PRESIDENT ☐ Delete TITLE TITLE DALE BOWE NAME NAME JEFF FEHR STREET ADDRESS BOX 380759 OCK, FL 33938 STREET ADDRESS 1881 CITRON STREET CHARLOTTE HARBOR. FL MURDOCK, 33980 CITY-ST-ZIP CITY-ST-ZIP DIRECTOR Addition Defete TITLE ☐ Change DIRECTOR TITLE NAME WILLIAM NOEL NAME CRAIG W. NESBITT STREET ADDRESS 381 STRASBURG DRIVE 2335 ABRADE AVE. STREET ADDRESS PORT CHARLOTTE, EL 33954 CITY-ST-ZIP CITY-ST-ZIP 33980 PORT CHARLOTTE, FL I hereby certify that the information supplied with this tiling 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 of 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 of the corporation or the receiver of trustee empower changed, or on an attachment with ac address, with JEFF FEHR, PRESIDENT (1941) <u>255-945</u> 1110 C -15-017

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