

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45570

FILED
Mar 28, 2011
Secretary of State

Entity Name: ABILITY HOUSING OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

126 W. ADAMS ST.
SUITE 502
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

126 WEST ADAMS STREET
SUITE 502
JACKSONVILLE, FL 32202 US

Current Mailing Address:

126 W. ADAMS ST.
SUITE 502
JACKSONVILLE, FL 32202 US

New Mailing Address:

126 WEST ADAMS STREET
SUITE 502
JACKSONVILLE, FL 32202 US

FEI Number: 59-3087085

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NAZWORTH, SHANNON
126 W. ADAMS ST.
SUITE 502
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

NAZWORTH, SHANNON
126 WEST ADAMS STREET
SUITE 502
JACKSONVILLE, FL 32202 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: SHANNON NAZWORTH

03/28/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: OSGATHORPE, JOHN
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: VD
Name: MATOVINA, GREG
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: T
Name: MATOVINA, GREG
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S
Name: HOLLEY, KAREN
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: CEO
Name: NAZWORTH, SHANNON
Address: 126 WEST ADAMS STREET, SUITE 502
City-St-Zip: JACKSONVILLE, FL 32202 US

I hereby 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 all other like empowered.

SIGNATURE: SHANNON NAZWORTH

RA

03/28/2011

Electronic Signature of Signing Officer or Director

Date