

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 21, 2006 8:00 am**  
**Secretary of State**

03-21-2006 90035 028 \*\*\*\*61.25

**DOCUMENT # N47081**

1. Entity Name  
**CONTEMPORARY HOUSING ALTERNATIVES OF  
FLORIDA, INC.**



Principal Place of Business

2675 50TH AVE NORTH  
123B

SAINT PETERSBURG, FL 33714 US

Mailing Address

2675 50TH AVE NORTH  
123B

SAINT PETERSBURG, FL 33714 US



03072006 No Chg-NP

CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-3118700

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

FELTNER, SANDRA L  
2675 50TH AVE NORTH  
STE 123B  
SAINT PETERSBURG, FL 33714

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee Is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WHITSON, AMY
STREET ADDRESS	4066 94TH AVE. 4964 91ST AVE
CITY-ST-ZIP	PINELLAS PARK, FL 33782
TITLE	VC/D
NAME	ELLSWORTH WARMOUTH
STREET ADDRESS	6TH EAGLE LANE
CITY-ST-ZIP	PALM HARBOR, FL
TITLE	STD
NAME	ALAN SWARTZ, C.P.A.
STREET ADDRESS	5626 PARK BLVD 4931 86TH AVE N.
CITY-ST-ZIP	PINELLAS PARK, FL 33781
TITLE	D
NAME	ROSE, ALCALA
STREET ADDRESS	15082B TOPAZ LANE
CITY-ST-ZIP	CLEARWATER, FL 33760
TITLE	C/D
NAME	MARQUIS, FRED E
STREET ADDRESS	339 BROOKSIDE COURT
CITY-ST-ZIP	PALM HARBOR, FL 33683
TITLE	D
NAME	VOLMAR, PETER J
STREET ADDRESS	265 108TH AVE. 6633 GREENBRIAR DR
CITY-ST-ZIP	TREASURE ISLAND, FL 33706 SEMINOLE FL 33777

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CONTINUATION SHEET ATTACHED

JOHN D. CARR, PRESIDENT

3/8/06

ATTACHMENT  
40035797

CONTINUATION OF DOCUMENT # N47081  
CONTEMPORARY HOUSING ALTERNATIVES OF FLORIDA, INC.  
FEI NUMBER 59-3118700

CONTINUATION OF BOX 10 (FORM CR2E037 (11/05))

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PRESIDENT  
CARR, JOHN D  
501 31ST AVENUE  
ST PETERSBURG, FL 33704