2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47081

FILED Apr 27, 2009 Secretary of State

Entity Name: CONTEMPORARY HOUSING ALTERNATIVES OF FLORIDA, INC.

Current P	rincipal Place of Business:	New Principal Place of Business:
	AVE NORTH	
123B SAINT PE ⁻	TERSBURG, FL 33714 US	
Current M	lailing Address:	New Mailing Address:
2675 50TH	A AVE NORTH	
123B	TERSBURG, FL 33714 US	
	: 59-3118700 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
	,,	
	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	, SANDRA L I AVE NORTH	
STE 123B SAINT PE	TERSBURG, FL 33714 US	
	e named entity submits this statement for the $\mbox{\scriptsize I}$ e of Florida.	ourpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Registered Ag	ent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D () Delete DODGE, SUSAN 2675 50TH AVE N. #214 SAINT PETERSBURG, FL 33714	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VC/D () Delete ELLSWORTH WARMOUTH 6TH EAGLE LANE PALM HARBOR, FL	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	STD () Delete ALAN SWARTZ, C.P.A. 4931 86TH AVE. N PINELLAS PARK, FL 33781	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete ROSE, ALCALA 15082B TOPAZ LANE CLEARWATER, FL 33760	Title: D (X) Change () Addition Name: NUNEZ, LISA Address: 7250A 72ND STREET N City-St-Zip: PINELLAS PARK, FL 33781
Title: Name: Address: City-St-Zip:	C/D () Delete STOWERS, JACOB 4237 HARBOUR CIRCLE S LARGO, FL 33770	Title: () Change () Addition Name: Address: City-St-Zip:
	D () Delete	Title: D (X) Change () Addition

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: JOHN D CARR PRES 04/27/2009