

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47254

FILED
Jan 29, 2005
Secretary of State

Entity Name: THE ORGANIZATION FOR HOUSING, EDUCATION, LABOR & PUBLIC ISSUES, INC.

Current Principal Place of Business:

PO BOX 494239
PORT CHARLOTTE, FL 33949

New Principal Place of Business:

Current Mailing Address:

PO BOX 494239
PORT CHARLOTTE, FL 33949 US

New Mailing Address:

FEI Number: 65-0316894 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PLUMMER, EUGENE
3280 TAMIAMI TRAIL
SUITE 39A
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

PLUMMER, EUGENE
4040 DURANT STREET
PORT CHARLOTTE, FL 33949 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: _____

Electronic Signature of Registered Agent

01/29/2005

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: PLUMMER, EUGENE,
Address: 3280 TAMIAMI TRAIL
City-St-Zip: PT. CHARLOTTE, FL

Title: DT () Delete
Name: WILLIAMS, ALEXANDER, W.
Address: 2026 NUREMBERG BLVD.
City-St-Zip: PUNTA GORDA, FL

Title: DT (X) Delete
Name: YOUNG, ANN,
Address: 12581 EUESTRIAN CIR #1015
City-St-Zip: FT. MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: PLUMMER, EUGENE,
Address: 4040 DURANT STREET
City-St-Zip: PT. CHARLOTTE, FL 33948

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EUGENE PLUMMER

Electronic Signature of Signing Officer or Director

DT

01/29/2005

Date