

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47254

FILED
Feb 24, 2009
Secretary of State

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

Current Principal Place of Business:

4040 DURANT STREET
PORT CHARLOTTE, FL 33948

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
4040 DURANT STREET
PORT CHARLOTTE, FL 33949 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: EUGENE PLUMMER

DT

02/24/2009

Electronic Signature of Signing Officer or Director

Date