## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N50083

**FILED** Apr 15, 2009 Secretary of State

Entity Name: ST. CHARLES HOUSING II, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

22250 VICK STREET

PORT CHARLOTTE, FL 33980 US

**Current Mailing Address: New Mailing Address:** 

22250 VICK STREET

PORT CHARLOTTE, FL 33980 US

FEI Number: 65-0352664 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOSEPH DIVITO, ESQ. DIVITO, JOSEPH A ESQ DIVITO & HIGHAM, P.A DIVITO & HIGHAM, P.A. 4514 CENTRAL AVENUE 4514 CENTRAL AVENUE

ST. PETERSBURG, FL 33711 US ST. PETERSBURG, FL 33711 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: JOSEPH A. DIVITO, ESQ 04/15/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete LUDDEN, JOHN FATHER HORNER, MICHAEL Name: Name:

21505 AUGUSTA AVE Address: 222 NESBIT STREET Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PUNTA GORD, FL 33950

Title: () Delete Title: (X) Change ( ) Addition SAMSON, ROSEANN K. Name: SAMSON, ROSEANN K Name:

Address: 1239 PRICE CIRCLE N.W. Address: 1239 PRICE CIRCLE N.W City-St-Zip: PORT CHARLOTTE, FL City-St-Zip: PORT CHARLOTTE, FL 33948

Title: () Delete Title: (X) Change ( ) Addition

BECKER, OLIVIA BECKER, OLIVIA Name: Name: 2347 LAKESHORE CIRCLE 2347 LAKESHORE CIRCLE Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

( ) Delete Title: ST Title: ST (X) Change ( ) Addition

Name: CASTERLINE, DON Name: CASTERLINE, DON Address: 2511 EVANHOE ST Address: 2511 IVANHOE ST

City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: PORT CHARLOTTE, FL 33952

Title: (X) Delete Title: () Change () Addition

HORNER, MICHAEL J. Name: Name: 222 NESBIT STREET Address: Address: City-St-Zip: PUNTA GORDA, FL 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: JOSEPH A. DIVITO, ESQ RΑ 04/15/2009