## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51166

FILED Feb 02, 2005 Secretary of State

Entity Name: DOMESTIC ABUSE SHELTER HOMES, INC.

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

2400 S. MCCALL RD 2400 S. MCCALL RD ENGLEWOOD, FL ENGLEWOOD, FL 34224

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

P.O. BOX 1484

ENGLEWOOD, FL 34295

FEI Number: 65-0390963 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:

NOBILE, RONALD G NOBILE, RONALD G 2400 S. MCCALL RD 2400 S. MCCALL RD

ENGLEWOOD, FL 34295 US ENGLEWOOD, FL 34224 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: RONALD G. NOBILE 02/02/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

RUSSELL, ED Name: NOBILE, RONALD G Name: 11045 TAMIAMI TRAIL, S. Address: 12112 SUMMER MEADOW DRIVE Address:

WARM MINERAL SPRINGS, FL 34287 BRADENTON, FL 34202

City-St-Zip: City-St-Zip:

(X) Change ( ) Addition Title: () Delete Title: GROSS, BARBARA Name: GROSS, BARBARA Name: Address: 6468 SAFFROD TERRACE Address: 6468 SAFFORD TERRACE City-St-Zip: NORTH PORT, FL 34287 City-St-Zip: NORTH PORT, FL 34286

Title: Title: SEC (X) Change ( ) Addition () Delete MARKS, LYN WYMAN, JEANNE Name: Name:

2065 LYNX RUN 188 CADDY ROAD Address: Address: City-St-Zip: NORTH PORT, FL 34288 City-St-Zip: ROTONDA, FL 33947

(X) Change ( ) Addition Title: VD ( ) Delete Title: BOD Name:

BRENNER, GARY Name: BRENNER, GARY 7094 DATELAND STREET Address: Address: 7094 DATELAND STREET City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: ENGLEWOOD, FL 34224

Title: () Delete Title: (X) Change ( ) Addition WAGNER, ANN THOROMAN, MARY M DET Name: Name:

1767 NEW POINT COMFORD RD 5650 NORTH PORT BLVD. Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: NORTH PORT, FL 34287

Title: () Delete Title: (X) Change ( ) Addition RAYNOR, DEBRA BRENNEMAN, BETTY L Name: Name: Address: 5650 N. PORT BLVD Address: 9193 SPRING VALLEY ROAD NORTH PORT, FL 34287 City-St-Zip: ENGLEWOOD, FL 34224 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: DONNA LECLERC ED 02/02/2005