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NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

N93000003713 (5) DOCUMENT

Applied From Prince of Business Mailing Activess Foo St. 1971 FAMILIATION F1 33318 FAMILIAN F1 3327349 S. Date compressed of Qualified S. Date compressed S. Date compre	HOCKI	EY FOR THE HOMELESS,	INC.				
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Country 2p	Suite, Apt.	#, etc.	<u> </u>			5. Certificate of Status Desired	\$8.75 Additional
Zep	City & Stat	te	⊢			1	□ \$5.00 May Be
9. Name and Address of Current Registered Agent 10. Name 10. Nam				— ·		8. This corporation has liability for	intangible tax under s. 199.032,
ROUSTAN, W. GRAEME 13621 SW 17 CT. MIRAMAR FL 33027 82 Street Arkinses (P.O. Box Number is Not Acceptable) 83 Street Arkinses (P.O. Box Number is Not Acceptable) 84 Oily FL 85 Zip Code 85 City FL 85 Zip Code							
13. Parasant to the processor of Sections 617 (9502 and 617 1508. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office formalist within and accept the obligations of, Section 617 (9502 inclidance). 11. Pursuant to the processor of Sections 617 (9502 and 617 1508. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered difference agent, in the State of Forder. Such of the obligations of, Section 617 (9502 Fiorida Statutes). SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)					Name		
MIRAMAR FL 33027 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered apent, or both, in the State of Fordas, Sorin change was authorized by the corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with, and accept the obligations of, Section 617,0502. Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with, and accept the obligations of, Section 617,0502. Florida Statutes, and accept the obligations of, Section 617,0502. Florida Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with a statute of Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with a statute of Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with a statute of Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with a statute of Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am formation with a statute of Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am fordation's registered agent, I am fordation's topic of the Fordas Statutes, the above-named corporation's board of directors. I hereby accept the exponentment as registered agent, I am fordation's part of the carriers of the provision of the Fordas Statutes, the above-named corporation submits this statement for the purpose of the provision of the Fordas Statutes, the corporation submits this statement for the purpose of the provision				1	32 Stree	: Arkiress (P.O. Box Number is Not Acceptal	ole)
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with an above named corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with an above named corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with an advected the objections of Section 617.0503, Honda Statutes. SIGNATURE Signature hold or presid name of registered agent as table. Familiar with a submit of agent and the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with a submit of agent and the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with a submit of agent and the corporation's board of directors. I hereby accept the appointment as registered agent. Familiar with a submit of agent and the corporation's board of directors. I hereby accept the appointment as a gent and an appointment as a gent and an appointment as a gent and a gent		· · · · · · · · · · · · · · · · · · ·		1	13		
11. Pursuant to the provisions of Sections 617,0502 and 617,1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, it bent, in the State of Florida. Such néange was authorized by the corporation's board of directors. I herety accept the appointment as registered eigent. I am significant with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12 PSDC ROUSTAN, W. G. 12. NAME ROUSTAN, W. G. 13. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12 12. AMBERT ADDRESS DIV. ST. ZP INTER MU ROUSTAN, WAYNE K. 13621 SW 17 CT. 13. SIREEL ADDRESS DIV. ST. ZP INTER MU ROUSTAN, WAYNE K. 13621 SW 17 CT. 13. SIREEL ADDRESS DIV. ST. ZP INTER MU ROUSTAN, WAYNE K. 13621 SW 17 CT. 13. SIREEL ADDRESS DIV. ST. ZP INTER MO ROUSTAN, WAYNE K. 13621 SW 17 CT. 13. SIREEL ADDRESS DIV. ST. ZP INTER MO ROUSTAN, WAYNE K. 13621 SW 17 CT. 13. SIREEL ADDRESS DIV. ST. ZP INTER MO Change Addition Addition Change Addition Change Addition Change Addition Addition DELETE THILE TO Change Addition Addition DELETE THILE TO Change Addition Addition ADDITIONS' CHANGES TO OFFICERS AND DIRECTORS IN 12 INTER ADDRESS DIV. ST. ZP THE CONTROL OFFICERS AND DIRECTORS IN 12 INTER ADDRESS ADDRESS					′		
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PSDC	10	Signature typed or printed name of registered age	nt and title if applicable (NO		gent signature		
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	STREET ADORESS			6.3 STRE	ET ADDRESS		
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiper or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, dripn an attachment with an addless.

SIGNATURE: 5

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WGRAME ROUGTAN 3/10/96

(310) 286-6784