

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004172

FILED
Jan 20, 2009
Secretary of State

Entity Name: PRINCE OF PEACE HOUSING, INC.

Current Principal Place of Business:

600 S. NOVA RD.
ORMOND BEACH, FL 32174

New Principal Place of Business:

664 S. NOVA RD.
ORMOND BEACH, FL 32174

Current Mailing Address:

11300 4TH ST. N.
SUITE 200
SAINT PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 59-3263124 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PLEUS, ROBERT J JR
255 S ORANGE AVE
ORLANDO, FL 32801 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: DP () Delete
Name: GAULT, ALBERT
Address: 19 WATERBLUFF DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: DS () Delete
Name: GAULT, NORMA
Address: 19 WATERBLUFF
City-St-Zip: ORMOND BEACH, FL 32174

Title: DT () Delete
Name: BENNETT, HAROLD
Address: 1213 PARKSIDE DR.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: ZAMBORSKY, BILL REV
Address: 600 S. NOVA RD.
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: SCHARITER, PAULINE
Address: 107 PINION CIRCLE
City-St-Zip: ORMOND BEACH, FL

Title: D () Delete
Name: PECK, JOHN D
Address: 875 LINDENWOOD CIR
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: DVP (X) Change () Addition
Name: SCHARITER, PAULINE
Address: 107 PINION CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

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: ALBERT W. GAULT

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date