2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State
02-03-2005 90045 008 ****61.25

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1. Entity Name
BRADENTON HOUSING AUTHORITY RESIDENTS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1307 6TH STREET WEST BRADENTON, FL 34205	1307 6TH STREET WEST BRADENTON, FL 34205

50010093

01242005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
59-6002720
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DESUE, WILLIAM B SR
% BRADENTON HOUSING AUTHORITY
1307 6TH STREET WEST
BRADENTON, FL 34205

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SMITH, MILDRED
STREET ADDRESS	1203 20TH STREET EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	V
NAME	GARNER, LUBERTHA
STREET ADDRESS	2544 9TH AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	T
NAME	CAROTHERS, SHERRI
STREET ADDRESS	240 15TH AVE WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	S
NAME	MARTINEZ, REBECCA
STREET ADDRESS	1203 19TH STREET COURT EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	AS
NAME	KINDER, DESIRE
STREET ADDRESS	2532 10TH AVE EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ _____ _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #