2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 15, 2006 8:00 am Secretary of State

DOCUMENT # N9400005042 1. Entity Name BRADENTON HOUSING AUTHORITY RESIDENTS' ASSOCIATION, INC.					02-15-2006 90029 015 ****61.25			
Principal Place of Business 1307 6TH STREET WEST BRADENTON, FL 34205 Mailing Address 1307 6TH STREET BRADENTON, FL 34205 BRADENTON, FL 3								
2. Principal Place of Business		3. Mailing Address					11 01 111	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02102006 (Chg-NP	CR2E037 (11/05)	
City & State		City & State		***************************************	4. FEI Number 59-60027	20		oplied For
Zip	Country	Zip	Cou	untry	5. Certificate of	Status Desired	S8.75 Add Fee Require	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Ac	dress of New R	tegistered Agent	
DESUE, WILLIAM B SR				Name Wenston Dise				
% BRADENTON HOUSING AUTHORITY				tiree Address (P.O. Box Number is Not Acceptable)				
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				1500	iden to-		FL 3	972
	gagned entity submits this statement to ious of registered agent	r'the purpose of changing it	s register	ed office or register	red agent, or both, i	in the State of Flo	orida. Tam familiar with,	and accept
SIGNATURE .	Street by the street agent	and little if applicable (NO	TE: Registere	d Agent signature required	d when reinstating)	(2/10/06 DATE	
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	Filing Fee s \$61.25 Due by May 1, 2006	9. Election Ca Trust Fund	ımpaign F	inancing	\$5.00 May Be Added to Fees		lake check payable t ida Department of S	
10.	Due by May 1, 2006 OFFICERS AND DIR	9. Election Ca Trust Fund	ımpaign F	Financing ion.	\$5.00 May Be Added to Fees	Flor		tate
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thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/06 (941)748-5568
Date Dayline Prone #