2004 NOT-FOR-PROFIT CORPORATION

FILED **ANNUAL REPORT (AR)** Mar 31, 2004 8:00 am DOCUMENT # N95000001444 **Secretary of State** 1. Entity Name 03-31-2004 90045 048 ****70.00 COMMUNITY COALITION ON HOMELESSNESS CORPORATION Principal Place of Business Mailing Address 202 13TH AVENUE E BRADENTON FL 34208 202 13TH AVENUE E BRADENTON FL 34208 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-3340921 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GASPAROVIC, WILLIAM P Street Address (P.O. Box Number is Not Acceptable) 202 13TH AVÉNUE E **BRADENTON FL 34208** 8. The above named entity submits this statement for the purpose of changing its registered office or regist the obligations registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution Florida Department of State Due By May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Chairs ☐ Delete Change Addition TITLE TITLE KELLY, GIGI Dolaes NAME NAME 439 CORTEZ WAY WEST STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-ZIP Vice-Chair perso Change ☐ Addition TITLE 🔯 Delete TITLE GROSS, ALICE NAME NAME 410 6TH AVE E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP CITY-ST-ZIP 3arasota 🛣 Delete TITLE Change Addition Addition Robert Eikill BUSTLE, LARRY NAME NAME 2205 5TH STREET W STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP CITY-ST-ZIP 34205 TITLE Delete TITLE ☐ Change ■ Addition SPENCE, JEWELL C NAME NAME 9205 FORRESTER DR STREET ADDRESS STREET ADDRESS **BRADENTON FL 34202** CITY-ST-ZIP CITY-ST-ZIP TITLE 🔽 Delete TITLE ☐ Change ☐ Addition WASHBURN, THOMAS C NAME NAME 4811 2ND AVE DR. N.W. STREET ADDRESS STREET ADDRESS BRADENTON FL 34209 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE 🗘 Delete TITLE Addition

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

1112 MANATEE AVE W

BRADENTON FL 34205

KEEN, DALE

NAME

STREET ADDRESS

CITY-ST-ZIP