

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2008 8:00 am**  
**Secretary of State**

05-01-2008 90239 040 \*\*\*\*61.25

**DOCUMENT # N95000003630**

1. Entity Name  
**FAIR HOUSING CONTINUUM, INC.**



Principal Place of Business  
**840 N. COCOA BLVD.  
STE F  
COCOA, FL 32922 US**

Mailing Address  
**840 N. COCOA BLVD.  
STE F  
COCOA, FL 32922 US**

40091211



2. Principal Place of Business - No P.O. Box #

**4085 US HWY 1**

3. Mailing Address

**4085 US HWY 1**

Suite, Apt. #, etc.

**101**

Suite, Apt. #, etc.

**101**

City & State

**Rockledge, FL**

City & State

**Rockledge, FL**

Zip

**32955**

Country

**US**

Zip

**32955**

Country

**US**

04302008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-3275005**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**B.J. OWENS  
840 N. COCOA BLVD.  
SUITE F  
COCOA, FL 32922**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **RANDELS, ROCKY**  
STREET ADDRESS **P.O. BOX 326**  
CITY-ST-ZIP **CAPE CANAVERAL, FL 32920**

TITLE **D** ☐ Delete  
NAME **CHANEY, MICHAEL**  
STREET ADDRESS **1367 EAST LAFAYETTE STREET, SUITE C**  
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

TITLE **VT** ☐ Delete  
NAME **SPAULDING, EARTHY**  
STREET ADDRESS **705 BLAKE AVE**  
CITY-ST-ZIP **COCOA, FL 32922**

TITLE **D** ☐ Delete  
NAME **BALDONADO, ANSELMO**  
STREET ADDRESS **P.O. BOX 1508**  
CITY-ST-ZIP **MELBOURNE, FL 329021508**

TITLE **P** ☐ Delete  
NAME **FOWLER, LARRY**  
STREET ADDRESS **504 PALM AVENUE**  
CITY-ST-ZIP **MERRITT ISLAND, FL 32952**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **Thayer, Kelly**  
STREET ADDRESS **1221 Rock Springs Dr**  
CITY-ST-ZIP **Melbourne, FL 32940**

12. I hereby 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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/08**

Date

**321-633-4551**

Daytime Phone #

# ATTACHMENT

40091211

## ATTACHMENT

### ~~2008 NOT-FOR-PROFIT CORPORATION~~ ANNUAL REPORT

DOCUMENT # N95000003630

FAIR HOUSING CONTINUUM, INC.  
8045 US HWY 1  
SUITE 101  
ROCKLEDGE, FL 32955

#### BLOCK 10. ADDITIONAL OFFICERS AND DIRECTORS AS PREVIOUSLY FILED:

TITLE	D
NAME	MARCUM, REBECCA J
STREET ADDRESS	412 PENGUIN DRIVE
CITY-ST-ZIP	SATELLITE BEACH, FL 32937

TITLE	M
NAME	BAADE, DAVID
STREET ADDRESS	4085 US HWY 1, STE 101
CITY-ST-ZIP	ROCKLEDGE, FL 32955