

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004679

FILED  
Jan 21, 2011  
Secretary of State

**Entity Name:** HOMES FOR INDEPENDENCE, INC.

**Current Principal Place of Business:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760 US

**New Principal Place of Business:**

**Current Mailing Address:**

2735 WHITNEY ROAD  
CLEARWATER, FL 33760 US

**New Mailing Address:**

**FEI Number:** 59-3342379

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

THOMAS, GENE  
2735 WHITNEY ROAD  
CLEARWATER, FL 33760 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:** PD  
**Name:** SANDONATO, WILLIAM JR.  
**Address:** 2735 WHITNEY ROAD  
**City-St-Zip:** CLEARWATER, FL 33760

**Title:** ST  
**Name:** NEVILLE, THOMAS  
**Address:** 2735 WHITNEY ROAD  
**City-St-Zip:** CLEARWATER, FL 33760

**Title:** D  
**Name:** THOMAS, URBAN  
**Address:** 3161 LAKE PINE WAY SOUTH  
**City-St-Zip:** TARPON SPRINGS, FL 34688

**Title:** D  
**Name:** DWIGHT, GILBERT  
**Address:** 1799 N HIGHLAND # 119  
**City-St-Zip:** CLEARWATER, FL 33755

**Title:** D  
**Name:** KLENKE, GUY  
**Address:** 6370 MANILA CR  
**City-St-Zip:** COCOA, FL 32927

I hereby 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 all other like empowered.

**SIGNATURE:** GENE THOMAS

VP

01/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date