

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002967

FILED  
May 08, 2009  
Secretary of State

Entity Name: HOUSING COUNSELING SERVICES, INC.

**Current Principal Place of Business:**

1306 NE 2ND ST  
SUITE 2  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1306 NE 2ND ST  
SUITE 2  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 59-3381762      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MILTON, JONAS C  
528 NE 4TH AVE.  
UNIT B  
GAINESVILLE, FL 32601 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: P      ( ) Delete  
Name: MILTON, JONAS C  
Address: 528 NE 4TH AVE., UNIT B  
City-St-Zip: GAINESVILLE, FL 32601

Title: P      ( ) Delete  
Name: GUNDY, REGINALD L DR  
Address: 600 EAVERSON ST  
City-St-Zip: JACKSONVILLE, FL 32204

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JONAS MILTON

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

PRES

05/08/2009

\_\_\_\_\_  
Date