

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2008 8:00 am**  
**Secretary of State**

01-16-2008 90048 028 \*\*\*\*61.25

**DOCUMENT # N96000004037**

1. Entity Name  
THE HOUGH FAMILY FOUNDATION, INC.



Principal Place of Business  
5700 MARINER ST.  
APT. 201E  
TAMPA, FL 33609

Mailing Address  
5700 MARINER ST.  
APT. 201E  
TAMPA, FL 33609



2. Principal Place of Business - No P.O. Box #  
555 5th AVE NE

3. Mailing Address  
555 5th AVE NE

Suite, Apt. #, etc.  
# 924

Suite, Apt. #, etc.  
# 924

City & State  
St Petersburg FL

City & State  
St Petersburg FL

Zip  
33701

Country  
USA

Zip  
33701

Country  
USA

01032008 Chg-NP CR2E037 (12/06)

4. FEI Number  
59-3395491

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

HENRY, SUSAN H  
5700 MARINER STREET APT 201 E  
TAMPA, FL 33609

**7. Name and Address of New Registered Agent**

Name  
SUSAN H HENRY

Street Address (P.O. Box Number is Not Acceptable)  
555 5th AVE NE

# 924

City  
St Petersburg

FL

Zip Code  
33701

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
HOUGH, WILLIAM R  
1 BEACH DR. SE, #1002  
SAINT PETERSBURG, FL 337013908 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
HOUGH, HAZEL C  
1 BEACH DRIVE S.E. #1002  
ST. PETERSBURG, FL 37221 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CPD  
HOUGH-HENRY, SUSAN L  
5700 MARINER ST., #201E  
TAMPA, FL 33609 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
HOUGH, W. ROBB  
400 COFFEE POT RIVIERA NE  
SAINT PETERSBURG, FL 33704 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TD  
FEINBERG, HELEN H  
100 SECOND AVENUE SOUTH #800  
ST. PETERSBURG, FL 33701 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
HENRY, SUSAN H ☒ Change ☐ Addition  
555 5th AVE NE #924 CPD  
St Petersburg FL 33701

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

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

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

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:**

*Susan H Henry*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Jan 9, 2008* (727)  
Date 821-3128  
Daytime Phone #