

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005255

FILED
Jun 01, 2004
Secretary of State

Entity Name: HOUSING CORPORATION OF AMERICA, INC.

Current Principal Place of Business:

6617 BLUE HERON DRIVE SOUTH
ST. PETERSBURG, FL 33707 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 185
PINELLAS PARK, FL 33780 US

New Mailing Address:

FEI Number: 59-3408620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRISHE, JAMES C
6617 BLUE HERON DRIVE SOUTH
ST. PETERSBURG, FL 33707 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: D () Delete
Name: GRAHAM, ANDREW L
Address: 1808 HILLS AVENUE
City-St-Zip: TAMPA, FL 33606 US

Title: D () Delete
Name: PAYNE, CHARLES M SR.
Address: 642 22 AVENUE SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: PD () Delete
Name: WARMOUTH, ELLSWORTH F
Address: 6 EAGLE LANE
City-St-Zip: PALM HARBOR, FL

Title: D () Delete
Name: PRICE, RAY
Address: 3501 SOUTH HARBOR BLVD., #2000
City-St-Zip: SANTA ANA, CA 92704

Title: SD () Delete
Name: HOUSE, JERRY D
Address: 236 58TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705 US

Title: D () Delete
Name: WEST, JAMES
Address: 1923 M. L. KING STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 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: ELLSWORTH F. WARMOUTH

PD

06/01/2004

Electronic Signature of Signing Officer or Director

Date