FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED Apr 19, 1999 8:00 am § Secretary of State Katherine Harris Secretary of State

04-19-1999 90060 030 ****61.25

DOCUMENT #	N9800000171	0

1. Corporation Name

PINELLAS HOUSING AGENCY, INC.

Principal Place of Business

Mailing Address

1968 BAYSHORE BOULEVARD DUNEDIN FL 34698	1968 BAYSHORE BOULEVARD DUNEDIN FL 34698	

	•						
2. Principal Pl	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed		
21		26			03/23/1998		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number Applied For		
22	·	27			Not Applicable		
City & State	3	City & State			5. Certificate of Status Desired \$8.75 Additional		
23	•	28	3		5. Certificate of Status Desired Fee Required		
Zip	Country	Zip	Country		6. Election Campaign Financing \$5.00 May Be		
24	25	29	0		Trust Fund Contribution Added to Fees		
	10. Name and Address of New Registered Agent						
	9. Name and Address of Current		81	Name)		
CIANFRONE, JOSEPH R 1968 BAYSHORE BOULEVARD			-	CO C			
			82	82 Street Address (P.O. Box Number is Not Acceptable)			
			83				
DUNEDIN	FL 34698						
			84	City	FL 85 Zip Code		
				<u> </u>			
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes Florida, Such change was auth	, the abov norized by	e-named the come	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered		
agent. I a	ກ familiar with, and accept the obligatio	ons of, Section 617.0503, Florid	a Statutes	551p c			
SIGNATURE	, -						
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Age	nt signature r	e required when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition		
NAME .	FLAHERTY, BRIAN		1.2 NAME		$I \leftarrow V$		
STREET ADDRESS	1522 SAND HOLLOW COURT		1.3 STREE	TADDRESS	s ·		
CITY-ST-ZIP	PALM HARBOR FL 34683		1.4 CITY-S	T- 71P			
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition		
1 1	COURNOYER, PIERRE		2.2 NAME		1		
NAME							
STREET ADDRESS	1739 KENIWORTH DRIVE		2.3 STREET ADDRES				
CITY-ST-ZIP	CLEARWATER FL 34616	El nei ere-	2.4 CITY-	ST-ZIP	Change Addition		
TITLE	D: : :	DELETE -	3.1 TITLE		Change Change		
NAME	CIANFRONE, JOSEPH R		3.2 NAME		V		
STREET ADDRESS	1968 BAYSHORE BOULEVARD		3.3 STREE	TADDRESS	3		
CITY-ST-ZIP	DUNEDIN FL 34698		3.4. CITY-5	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition		
NAME			4. 2 NAME	,			
STREET ADDRESS				TADDRESS	s		
CITY-ST-ZIP			4.4 CÍTY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
		j		TADDRESS	s		
STREET ADORESS							
CITY-ST-ZIP			5.4 CITY - S 6.1 TITLE	11 - ZR"	☐ Change ☐ Addition		
TITLE		☐ DELETE			Cicianide Civamino		
NAME	: !		6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS	S		
CITY-ST-ZIP	l		6.4 CITY-S	T-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address written other like empowered.

SIGNATURE: