

FILE NOW. FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -4 AM 10:24

DOCUMENT # P94000022657 (8)

1. Corporation Name

COMMUNITY HOUSING CORPORATION REALTY

Principal Place of Business

**46 N. WASHINGTON BLVD.
#1
SARASOTA FL 34236**

Mailing Address

**46 N. WASHINGTON BLVD.
#1
SARASOTA FL 34236**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/22/1994

3a. Date of Last Report
N/A

4. FEI Number
65-0484037

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 235 S. OSPREY AVE.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

23 SARASOTA, FL

City & State

28

Zip **24 34236**

Country **25 USA**

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**PATTERSON, JOHN
46 NORTH WASHINGTON BLVD.
#1
SARASOTA FL 34236**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **PATTERSON, JOHN**
STREET ADDRESS **46 N. WASHINGTON BLVD., #1**
CITY, ST, ZIP **SARASOTA FL 34236**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
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STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **D** ☒ Change ☐ Addition
12 NAME **CONWAY, JACK T.**
13 STREET ADDRESS **235 S. OSPREY AVE.**
14 CITY, ST, ZIP **SARASOTA, FL 34236**

21 TITLE **D, T** ☐ Change ☒ Addition
22 NAME **FARR, DONALD M.**
23 STREET ADDRESS **235 S. OSPREY AVE.**
24 CITY, ST, ZIP **SARASOTA, FL 34236**

31 TITLE **D** ☐ Change ☒ Addition
32 NAME **CLARET, JULIO**
33 STREET ADDRESS **235 S. OSPREY AVE.**
34 CITY, ST, ZIP **SARASOTA, FL 34236**

41 TITLE **D** ☐ Change ☒ Addition
42 NAME **MRSTIK, DOUGLAS M.**
43 STREET ADDRESS **235 S. OSPREY AVE.**
44 CITY, ST, ZIP **SARASOTA, FL 34236**

51 TITLE **P** ☐ Change ☒ Addition
52 NAME **HOLLAND, LINDA E.**
53 STREET ADDRESS **235 S. OSPREY AVE.**
54 CITY, ST, ZIP **SARASOTA, FL 34236**

61 TITLE **VP, S** ☐ Change ☒ Addition
62 NAME **SCOTT, J. L.**
63 STREET ADDRESS **235 S. OSPREY AVE.**
64 CITY, ST, ZIP **SARASOTA, FL 34236**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Linda E. Holland
SIGNATURE AND TYPED OR PRINTED NAME OF BORING OFFICER OR DIRECTOR
LINDA E. HOLLAND, President

(813) 365-7971