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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000019474 (2)

1. Corporation Name
ALTERNATIVE HOMEMAKING WITH A HEART OF VENICE, I
NC.

Principal Place of Business
100 W. VENICE AVE.
VENICE FL 34285

Mailing Address
100 W. VENICE AVE.
VENICE FL 34285-1928



3. Date Incorporated or Qualified 04/01/1995
3a. Date of Last Report 05/01/1996

2. Principal Place of Business
21 850 Pinebrook Rd.
Suite, Apt. #, etc.
22 Pinebrook Plaza
City & State
23 Venice, Florida
Zip
24 34292
Country
25 Sarasota
2a. Mailing Address
26 850 Pinebrook Rd.
Suite, Apt. #, etc.
27 Pinebrook Plaza
City & State
28 Venice, Florida
Zip
29 34292
Country
30 Sarasota

4. FEI Number 65-0565160
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
7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
GONYER, ROBERT A
100 W. VENICE AVE.
VENICE FL 34285
10. Name and Address of New Registered Agent
81 Name GONYER, ROBERT A.
82 Street Address (P.O. Box Number is Not Acceptable)
850 Pinebrook Rd.
83 Pinebrook Plaza
84 City Venice FL 85 Zip Code 34292

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 I accept the provisions of, Section 607.0505, Florida Statutes.

SIGNATURE *Robert A. Gonyer* (NOTE: Registered Agent signature required when reappointing) DATE 1/14/97

12. OFFICERS AND DIRECTORS
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE D
1.2 NAME GONYER, ROBERT A. SR.
1.3 STREET ADDRESS 100 W. VENICE AVE.
1.4 CITY - ST - ZIP VENICE FL 34285
2.1 TITLE D
2.2 NAME GONYER, FRANCES A.
2.3 STREET ADDRESS 100 W. VENICE AVE.
2.4 CITY - ST - ZIP VENICE FL 34285
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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 included 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE: *Robert A. Gonyer* DATE 1/14/97
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***165.00

CR2E034 (9/96)