## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 712846** 

Entity Name: ALCO HALF WAY HOUSE, INC.

**Current Principal Place of Business:** 

1120 HUBBARD STREET JACKSONVILLE, FL 32206

**Current Mailing Address:** 

1120 HUBBARD STREET JACKSONVILLE, FL 32206 US

FEI Number: 59-6203034 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACKSONVILLE FL 32207

WHITAKER, JOSEPH E 4034 RIVER VALLEY ROAD, W JACKSONVILLE, FL 32277 US

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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 11, 2013

**Secretary of State** 

CC0310624487

Officer/Director Detail:

Title **TREASURER** Title PD

CROOKS, STEVE Name JOHNS, JANICE H Name Address 3063 WATER STREET Address 815 N. MAIN STREET City-State-Zip: JACKSONVILLE FL 32208

Title **SECRETARY** Title ASST. SECRETARY Name WISE, MARY J Name WHITAKER, JOSEPH E

1120 HUBBARD STREET Address Address 4034 RIVER VALLEY ROAD, W JACKSONVILLE FL 32206 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32277

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH E. WHITAKER

ASS'T SECRETARY

04/11/2013