## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006586

Entity Name: DAVE'S HOUSE, INC.

**Secretary of State** CC7777503756

# **Current Principal Place of Business:**

9152 POINT CYPRESS DR ORLANDO, FL 32836

# **Current Mailing Address:**

9152 POINT CYPRESS DR ORLANDO, FL 32836

FEI Number: 27-0533943 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOULD, PAMELA J MRS. 2931 SUNBITTERN CT. WINDERMERE, FL 34786 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: PAMELA GOULD 02/10/2017

Electronic Signature of Registered Agent

Date

**FILED** Feb 10, 2017

Officer/Director Detail:

Title **CHAIR** Title VS

Name WILENSKY, RONALD J MR. Name WILENSKY, LINDA J. MRS. 9152 POINT CYPRESS DR Address 9152 POINT CYPRESS DR Address City-State-Zip: ORLANDO FL 32836 ORLANDO FL 32836 City-State-Zip:

Title PRESIDENT AND CEO Title DIRECTOR Name GOULD, PAMELA MENDOZA, JOE N Name

Address 9152 POINT CYPRESS DR Address P.O.BOX 781928 ORLANDO FL 32836

City-State-Zip: City-State-Zip: ORLANDO FL 32878-1928

Title VC Title **TREASURER** 

Name EDWARD, HOFMA Name HARRIMAN, MARTHA

Address **WITHUM** 2108 OPERC DRIVE Address 14

WINDERMERE FL 34786 City-State-Zip: City-State-Zip: ORLANDO FL 32803

Title MR. Title MRS.

JIM, DEMARK Name LORI. TRAINER Name

Address COMMUNITY BASED CARE Address SOUTHERN AFFORDABLE SERVICES

1594 COMMON WAY RD. 102

City-State-Zip: ORLANDO FL 32814 335 N. KNOWLES AVE 101

City-State-Zip: WINTER PARK FL 32789

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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.

02/10/2017 SIGNATURE: PAMELA GOULD **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title MS.

Name TERRI, BENSON

Address PANDO PARTNER WEALTH MANAGEMENT

4849 MURRAY LEE LANE

City-State-Zip: ORLANDO FL 32606

Title DIRECTOR

Name PALMA, MATTHEW

Address BROAD AND CASSEL

390 NORTH ORANGE AVE SUITE 1400

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name WRIGHT, ANA

Address 9720 NEARWATER PL
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR

Name HUSSEY, JOHN

Address 37 N ORANGE AVE

SUITE 769

City-State-Zip: ORLANDO FL 32801

Title DIRECTOR

Name ECKELBARGER, ADAM

Address MADER SOUTHEAST CONSTRUCTION

2300 E LANDSTREET RD

City-State-Zip: ORLANDO FL 32824