2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2019
Secretary of State
5779933421CC

DOCUMENT# N12000002032

Entity Name: JOSEPH'S HOUSE BROOKSVILLE,INC

Current Principal Place of Business:

823 JOSEPHINE ST
BROOKSVILLE, FL 34601

Current Mailing Address:

823 JOSEPHINE STREET
BROOKSVILLE, FL 34601 US

FEI Number: 45-3618090

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOODRUFF, SHAWN
823 JOSEPHINE ST
BROOKSVILLE, FL 34601 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: SHAWN WOODRUFF 02/26/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	WOODRUFF, SHAWN
Address	4195 NEFF LAKE ROAD
City-State-Zip:	BROOKSVILLE FL 34601

Title	DIRECTOR
Name	HAMMETT, MERLE
Address	14366 EDGEKNOLL ST.
City-State-Zip:	BROOKSVILLE FL 34613

Title	DIRECTOR
Name	CASTEL, SAM
Address	6035 FOREST CREEK DRIVE
City-State-Zip:	BROOKSVILLE FL 34601

Title	SECRETARY
Name	JAXTHEIMER, JUDITH DR.
Address	823 JOSEPHINE ST.
City-State-Zip:	BROOKSVILLE FL 34601

Title	PRESIDENT
Name	LAMBRIGHT, RICHARD
Address	220 SUNSET DRIVE
City-State-Zip:	BROOKSVILLE FL 34601

Title	DIRECTOR
Name	HAMMETT, JEROME
Address	14366 EDGEKNOLL ST
City-State-Zip:	SPRING HILL FL 34613

Title	DIRECTOR
Name	VICKERS, STEVE
Address	823 JOSEPHINE STREET
City-State-Zip:	BROOKSVILLE FL 34601

Title	DIRECTOR
Name	GIARRATANA, DONNA
Address	6375 EMMANUELS WAY
City-State-Zip:	BROOKSVILLE FL 34602

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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.

SIGNATURE: SHAWN WOODRUFF EXECUTIVE DIRECTOR 02/26/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WADDY, CYNTHIA
Address	411 VIRGINIA AVE.
City-State-Zip:	BROOKSVILLE FL 34601