

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

01/11/2021

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

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

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

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

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

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

Title DIRECTOR
Name RUSS, THOMAS G
Address 2826 KINGSWOOD CIRCLE
City-State-Zip: BROOKSVILLE FL 34604

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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

TREASURER

01/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title V-PRES.
Name HANSEN, RON
Address 13475 PRINCEWOOD COURT
City-State-Zip: SPRING HILL FL 34609

Title DIRECTOR
Name BEEBE, GREG
Address 4025 MORRIS BRIDGE RD.
City-State-Zip: ZEPHYRHILLS FL 33543