

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000007406

FILED
Feb 17, 2019
Secretary of State
7061538275CC

Entity Name: ROOF HOUSING TRUST, INC

Current Principal Place of Business:

3050 HORSESHOE DRIVE N.
STE. 285
NAPLES, FL 34104

Current Mailing Address:

3050 HORSESHOE DR N STE 285
NAPLES, FL 34104 US

FEI Number: 82-2276594

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUKUP, SHERYL
3050 HORSESHOE DRIVE N.
STE. 285
NAPLES, FL 34104 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title: CEO
Name: SOUKUP, SHERYL
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: SECRETARY, TREASURER
Name: NAPPO, FRANK DR.
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: CHAIRMAN
Name: EDWARDS, RENEE
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: VC
Name: SMITH, MARY
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: DIRECTOR
Name: GREGORY, DAMIAN
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: DIRECTOR
Name: LEIGH, KATHY
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

Title: DIRECTOR
Name: STEVENS, RICHARD
Address: 3050 HORSESHOE DRIVE N.
STE. 285
City-State-Zip: NAPLES FL 34104

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: SHERYL SOUKUP

EXECUTIVE DIRECTOR

02/17/2019

Electronic Signature of Signing Officer/Director Detail

Date