

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47081

FILED
Jan 23, 2020
Secretary of State
5508895431CC

Entity Name: CONTEMPORARY HOUSING ALTERNATIVES OF FLORIDA, INC.

Current Principal Place of Business:

2675 50TH AVE NORTH
123B
SAINT PETERSBURG, FL 33714

Current Mailing Address:

2675 50TH AVE NORTH
123B
SAINT PETERSBURG, FL 33714 US

FEI Number: 59-3118700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LETTELLEIR, JOSEPH T
2675 50TH AVE NORTH
STE 123B
SAINT PETERSBURG, FL 33714 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: JOSEPH T. LETTELLEIR

01/23/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DEVEAUX, AVA
Address 3843 18TH AVENUE SOUTH
City-State-Zip: SAINT PETERSBURG FL 33711

Title CHAIRMAN
Name BOGUE, DONALD J
Address 4651 1ST STREET NE
City-State-Zip: ST PETERSBURG FL 33704

Title DIRECTOR
Name ADAMS, MARGO
Address 211 7TH AVENUE SW
City-State-Zip: LARGO FL 33770

Title SECRETARY TREASURER
Name MONTGOMERY, TAYLOR
Address 5314 12TH AVENUE S
City-State-Zip: GULFPORT FL 33707

Title PRESIDENT
Name LETTELLEIR, JOSEPH T
Address 2675 50TH AVE NORTH
123B
City-State-Zip: SAINT PETERSBURG FL 33714

Title VICE PRESIDENT - DEVELOPMENT
Name STOWERS, JACOB
Address 2675 50TH AVE NORTH
123B
City-State-Zip: SAINT PETERSBURG FL 33714

Title VICE PRESIDENT - PROPERTY
MANANGEMENT
Name MATER, TRACY
Address 2675 50TH AVE NORTH
123B
City-State-Zip: ST PETERSBURG FL 33714

Title VICE CHAIRMAN
Name SAVITSKY, JOHN E
Address PO BOX 41647
City-State-Zip: ST. PETERSBURG FL 33743

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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: JOSEPH T. LETTELLEIR

PRESIDENT

01/23/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MAXWELL, EDWINA
Address PO BOX 56713
City-State-Zip: ST. PETERSBURG FL 33732