

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 724683

FILED
Jan 27, 2003
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF HOUSING AND REDEVELOPMENT OFFICIALS

Current Principal Place of Business:

335 BEARD STREET
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 14629
TALLAHASSEE, FL 323174629 US

New Mailing Address:

FEI Number: 23-0724683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKROB, ROBERT
335 BEARD STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: TURNER, RICHARD
Address: 118 CEDAR STREET
City-St-Zip: DAYTONA BEACH, FL

Title: D () Delete
Name: BRUNSON, SAM
Address: 371 WEST HICKORY AVENUE
City-St-Zip: CRESTVIEW, FL

Title: PD () Delete
Name: MONAHAN, GAIL
Address: 703 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL

Title: TD () Delete
Name: CREGAN, KEVIN
Address: 1773 NORTH STATE ROAD 7
City-St-Zip: LAUDERHILL, FL

Title: SD () Delete
Name: REDDICK, CATHERINE
Address: 2670 AVENUE C SW
City-St-Zip: WINTER HAVEN, FL

Title: D () Delete
Name: LAMBERT, BOB
Address: PO BOX 6416
City-St-Zip: TITUSVILLE, FL 32782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: TURNER, RICHARD
Address: 118 CEDAR STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Change () Addition
Name: BRUNSON, SAM
Address: 371 WEST HICKORY AVENUE
City-St-Zip: CRESTVIEW, FL 32536

Title: PD (X) Change () Addition
Name: MONAHAN, GAIL
Address: 703 NE 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: TD (X) Change () Addition
Name: CREGAN, KEVIN
Address: 3810 INVERRARY BLVD. #405
City-St-Zip: LAUDERHILL, FL 33319

Title: SD (X) Change () Addition
Name: REDDICK, CATHERINE
Address: 2670 AVENUE C SW
City-St-Zip: WINTER HAVEN, FL 33880

Title: D (X) Change () Addition
Name: LAMBERT, BOB
Address: PO BOX 6416
City-St-Zip: TITUSVILLE, FL 32796

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GAIL MONAHAN

Electronic Signature of Signing Officer or Director

P

01/27/2003

Date