2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 763498

1. Entity Name
THE Florida Association of Housing Finance Agencies, Inc.

FILED
00 JUN -9 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
370 Pinellas Bayway #C Tierra Verde, FL 33715	PO Box 568007 Orlando, FL 32856

2. Principal Place of Business	3. Mailing Address
370 Pinellas Bayway	PO Box 568007
Suite, Apt. #, etc. #C	Suite, Apt. #, etc.
City & State Tierra Verde FL	City & State Orlando FL
Zip 33715 Country USA	Zip 32856 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2949126 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LISA Fisher 343 Agnes St Orlando FL 32801	Name Lisa Fisher Street Address (P.O. Box Number is Not Acceptable) 370 Pinellas Bayway #C City Tierra Verde FL Zip Code 33715

8. 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 Lisa Fisher 5/10/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Fisher, Lisa Post Box 568007 Orlando, Florida 32856 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME 500003291275--5 -06/15/00--01062--037 *****70.00 *****70.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Abbott, Angela 11A Max Brewer Mem Pkwy Titusville, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Jernigan, Gordon 25 W Cedar ST #S30 Pensacola, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Robinson, Lennard 110 NE 3rd ST #300 Ft Lauderdale FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME LS ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Ellington, Richard 7014 S Hwy 1 #402 North Palm Bch, FL ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAME ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lisa Fisher (SIGNATURE REQUIRED) (Lisa Fisher) 5/10/00 407-481-2324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #