

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001437

**FILED  
Jun 02, 2009  
Secretary of State**

**Entity Name:** SOUTHSIDE AFFORDABLE HOUSING AND INVESTMENT SHOWCASE, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

1617 S ADAMS ST  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

**New Mailing Address:**

1617 S ADAMS ST  
TALLAHASSEE, FL 32301

**FEI Number:**                                  **FEI Number Applied For (X)**                                  **FEI Number Not Applicable ( )**                                  **Certificate of Status Desired ( )**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

HENRY, CHRISTIC  
1617 S ADAMS ST  
TALLAHASSEE, FL 32301     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

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                          PD                          ( ) Delete  
Name:                          HENDERSON, BETSY  
Address:                          2670 LONNBLADH ROAD  
City-St-Zip:                          TALLAHASSEE, FL 32308

Title:                          ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:                          D                          ( ) Delete  
Name:                          HENRY, CHRISTIC  
Address:                          3121 PONTIAC DRIVE  
City-St-Zip:                          TALLAHASSEE, FL 32301

Title:                          ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BETSY HENDERSON

PD

06/02/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date