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Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N31825 (5)

1. Corporation Name
HOUSING AND NEIGHBORHOOD DEVELOPMENT SERVICES OF CENTRAL FLORIDA, INC.



Principal Place of Business 2211 EAST HILLCREST ST. ORLANDO FL 32803 US	Mailing Address 2211 EAST HILLCREST ST. ORLANDO FL 32803-4905 US
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2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

3. Date Incorporated or Qualified 04/20/1989	3a. Date of Last Report 03/14/1996
4. FEI Number 59-2951883	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**LATHAM, PETER G.
111 NORTH ORANGE AVENUE, STE. 1800
201 SOUTH ORANGE AVENUE
ORLANDO FL 32802**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)
390 North Orange Avenue Suite 600

83. **Barnett Bank Center**

84. City **Orlando,** FL 85. Zip Code **32801**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	TOMPKINS, THOMAS	
STREET ADDRESS	1731 BOGGY CREEK ROAD	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PEARY, ROOSEVELT	
STREET ADDRESS	7625 UDINE WAY	
CITY-ST-ZIP	ORLANDO, FL 32801	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CHARLES, MEROY	
STREET ADDRESS	724 W BENTLEY ROAD	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ROBERSON, JANICE M.	
STREET ADDRESS	884 MERCY DR, STE 1	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DYE, RICHARD A.	
STREET ADDRESS	2277 LEE RD., SUITE 200 EAST	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	FISHER, LISA	
STREET ADDRESS	14213 TILDEN RD.	
CITY-ST-ZIP	WINTER GARDEN FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Ernesto Gonzalez	
1.3 STREET ADDRESS	108 Wymore Road	
1.4 CITY-ST-ZIP	Winter Park, FL 32789	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	Hennie Tina Carmichael	
6.3 STREET ADDRESS	2229 McLaren Circle #57	
6.4 CITY-ST-ZIP	Kissimmee, FL 34744	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* DATE **4/1/97**

CR2E037 (9/96)

ATTACHMENT - DOC #N31825

HOUSING AND NEIGHBORHOOD DEVELOPMENT SERVICES OF
CENTRAL FLORIDA, INC.
2211 EAST HILLCREST STREET
ORLANDO, FLORIDA 32803

OFFICERS AND DIRECTORS

D
Kimberly Bergin
First Union national
800 N Magnolia Ave
Suite 800
Orlando, FL 32803

D
Jean Metts
2970 Orlando Drive
Sanford, FL 32773

D
Roger Fee
Barnett Bank
390 West Orange Avenue
Suite 700
Orlando, FL 32801

D
Mansour Max Sabeti
Realty Resource of Central Florida
4063 North Goldenrod Road #208
Winter Park, FL 32792