

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 03, 2005
Secretary of State**

DOCUMENT# N95000004340

Entity Name: AFFORDABLE HOUSING VENTURES, INC.

Current Principal Place of Business:13839 US 98 BYPASS
DADE CITY, FL 33525 US**New Principal Place of Business:****Current Mailing Address:**13839 US 98 BYPASS
DADE CITY, FL 33525 US**New Mailing Address:**

FEI Number: 59-3333830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:LITTLE, THOMAS C. E
2123 NE COACHMAN RD
SUITE A
CLEARWATER, FL 33575 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: PD () Delete
Name: MORRILL, PENELOPE
Address: 37314 MERIDIAN AVE
City-St-Zip: DADE CITY, FL 33525 USTitle: VPD () Delete
Name: CUMBEE, RALPH
Address: 37535 LAYTON ROAD
City-St-Zip: DADE CITY, FL 33525 USTitle: TD () Delete
Name: STURWOLD, RAYMOND EARL
Address: 37407 MOORE DRIVE
City-St-Zip: DADE CITY, FL 33525 USTitle: SD () Delete
Name: DILLON, LINDA
Address: 36815 PERRY COURT
City-St-Zip: DADE CITY, FL 33525 USTitle: D () Delete
Name: SIMONE, SCOTT
Address: 1434 47TH AVE. N
City-St-Zip: ST. PETERSBURG, FL 33716 USTitle: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VPD (X) Change () Addition
Name: CUMBEE, RALPH
Address: 36351 CLINTON AVENUE
City-St-Zip: DADE CITY, FL 33525 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: RIVERA-SINGLETARY, GEORGINA
Address: 39017 SOUTH AVENUE
City-St-Zip: ZEPHYRHILLS, FL 33540 USTitle: D () Change (X) Addition
Name: BRITTON, KATHERINE
Address: 15950 21 ST STREET
City-St-Zip: DADE CITY, FL 33525

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: PENELOPE MORRILL

PD

05/03/2005

Electronic Signature of Signing Officer or Director

Date