2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# N98000003243

Entity Name: COALITION OF AFFORDABLE HOUSING PROVIDERS, INC.

Current Principal Place of Business:

335 BEARD ST
TALLAHASSEE, FL 32303 US

New Principal Place of Business:

Current Mailing Address:

335 BEARD ST
TALLAHASSEE, FL 32303 US

New Mailing Address:

PO BOX 14629
TALLAHASSEE, FL 32317

FEI Number: 59-3518972 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SKROB, ROBERT
335 BEARD ST
TALLAHASSEE, FL 32303

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:	D	( ) Delete
Name:	PLONSKIER, MARC S	
Address:	120 FORBES BLVD.	
City-St-Zip:	MANSFIELD, MA	
Title:	SD	( ) Delete
Name:	STEPHENS, LISA	
Address:	20725 SW 46TH AVENUE	
City-St-Zip:	NEWBERRY, FL 32669	
Title:	C	( ) Delete
Name:	KOEHLER, DEBRA	
Address:	655 N. FRANKLIN STREET, SUITE 2200	
City-St-Zip:	TAMPA, FL 33602	
Title:	D	( ) Delete
Name:	MACLEISH-WHITE, ODETTA	
Address:	4707 NW 53RD AVENUE, SUITE A	
City-St-Zip:	GAINESVILLE, FL	
Title:	TD	( ) Delete
Name:	BELLNER, BETH	
Address:	1124 E. SEMORAN BLVD.	
City-St-Zip:	APOPKA, FL	
Title:	D	( ) Delete
Name:	BOGGIO, LLOYD	
Address:	2837 SW 27TH AVE., #303	
City-St-Zip:	COCONUT GROVE, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	VD	(X) Change ( ) Addition
Name:	FRIEDMAN, MITCHELL	
Address:	9400 S DADELAND BLVD, STE 100	
City-St-Zip:	MIAMI, FL 33156	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	C	(X) Change ( ) Addition
Name:	KOEHLER, DEBRA	
Address:	5106 HOMER AVENUE	
City-St-Zip:	TAMPA, FL 33629	
Title:	D	(X) Change ( ) Addition
Name:	CULP, SCOTT	
Address:	1551 SANDSPUR ROAD	
City-St-Zip:	MAITLAND, FL 32751	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	TATREAU, KEVIN	
Address:	2002 N LOIS AVE. STE 150	
City-St-Zip:	TAMPA, FL 33607	

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: DEBRA KOEHLER C 01/13/2004

Electronic Signature of Signing Officer or Director Date