

DOCUMENT # N98000003439

1. Entity Name
THE HOUSING LEAGUE, INC.

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90065 015 ****70.00

Principal Place of Business Mailing Address
2601 S BAYSHORE DR. STE 1225 MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.
3. Mailing Address Suite, Apt. #, etc.

City & State Zip Country

4. FEI Number 65-0841175 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FLICK, JERRY
2601 S BAYSHORE DR # 1225
MIAMI FL 33133

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 DP
NAME THOMAS, FREIWALD
STREET ADDRESS 18040 NW 87 AVE.
CITY-ST-ZIP MIAMI FL 33015 Delete

TITLE D
NAME THOMAS FREIWALD
STREET ADDRESS 18040 N.W. 87 AVE
CITY-ST-ZIP MIAMI, FL. 33015 Change Addition

TITLE PD
NAME BYDASH, RUTH A
STREET ADDRESS 7762 MIRAMAR PKWY
CITY-ST-ZIP MIRAMAR FL 33023 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE DS
NAME FREIWALD, THOMAS
STREET ADDRESS 18040 N.W. 87TH AVE.
CITY-ST-ZIP MIAMI FL 33015 Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP Change Addition

TITLE
NAME JERRY FLICK
STREET ADDRESS 2601 S BAYSHORE DR. #1225
CITY-ST-ZIP MIAMI FL 33133 Delete

TITLE PD
NAME JERRY FLICK
STREET ADDRESS 2601 S. BAYSHORE DR #1225
CITY-ST-ZIP MIAMI FL 33133 Change Addition

TITLE
NAME JERRY FLICK
STREET ADDRESS 2601 S BAYSHORE DR #1225
CITY-ST-ZIP MIAMI FL 33133 Delete

TITLE S/T/D
NAME JACQUELINE FLICK
STREET ADDRESS 2601 S. BAYSHORE DR. #1225
CITY-ST-ZIP MIAMI FL 33133 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: _____ REQUIRED

JAH 8, 2001 305-746-8320
Date Daytime Phone #