## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 12 1996 8:00 am
Secretary of State

1996

DOCUMENT #

N95000004340 (4)

AFFORDABLE HOUSING VENTURES, INC.

1006 GROV	ce of Business E STREET ER FL 34617	Mailing Address  1006 GROVE STREET CLEARWATER FL 3461	7			
				3. Date Incorporated or Qualified 09/12/1995	3a. Date o	f Last Report
2. Principal F	Place of Business	2a. Mailing Address 26		4. FE! Number		Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		59-3333 83	/ 6	Not Applicable 8.75 Additional
City & Sta	te	City & State		Certificate of Status Desired	<b>₽</b> *	Fee Required
23 Zm	Country	28		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip <b>24</b>	<b>25</b>	Zip <b>29</b>	Country 30	8. This corporation has liability for	intangible tax un	der s. 199.032,
·	9. Name and Address of Cu	rrent Registered Agent	1501	Florida Statutes Yes No  10. Name and Address of New Registered Agent		
			81 Name	Halino and Address Of NBW H	efisteled Võet	ц
BORTO	n, pamela k					
1006 G	ROVE STREET		82 Street A	Address (P.O. Box Number is Not Acceptab	le)	
	VATER FL 34617		83			
			84 City		85	Zip Code
11. Pursuant	to the provisions of Sections 617.0	502 and 617 1508. Floods Statute	o the observe to the		PL!	1
or registe	red agent, or both, in the State of Fits, and accept the obligations of, S	lorida. Such change was authorize	ed by the corporation's b	rporation submits this statement for the pur poard of directors. I hereby accept the appo	pose of changing	g its registered office
	ica, and accept the obligations of, S	ection 617.0503, Horida Statutes.	•	то арух	midifient as regis	tereo agent. i am
SIGNATURE	Signature, typed or printed name of registered a	WHICH BUILD BOND OF THE BOND O				ĺ
12.		AND DIRECTORS	IE Registered Agent signature recently 13.		DATE	
TITLE	DP	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFF		
NAME	BORTON, PAMELA K				Cha	ange 🔲 Addition
STREET ADDRESS	1006 GROVE STREET		1.2 NAME			i
CITY-ST-ZIP	CLEARWATER FL 34617		1 3 STREET ADDRESS			
TITLE	DVS	DELETE	14 CITY - ST - ZIP			
NAME	SMITH, THOMAS E	Dettere	2 1 TITLE		☐ Cha	ange 🗌 Addition
STREET ADDRESS	13924 SEVENTH ST.		2 2 NAME			
CITY-ST-ZIP	DADE CITY FL 33525		2 3 STREET ADCRESS			
TITLE	DT	FIDELETE	2 4 CITY - ST - ZIP			
NAME	Roberts, Kevin T	DELETE	3 1 TITLE		Cha	rige Addition
STREET ADDRESS	13924 SEVENTH ST.		3 2 NAME			İ
CITY-ST-ZIP	DADE CITY FL 33525		3 3 STREET ADDRESS			[
TITLE	D/DE 0111 / E 00025	Decrete	34 CITY-ST-ZIP			
NAME		DELETE	4 1 TITLE		☐ Char	nge [] Addition
STREET ADDRESS			4 2 NAME			ļ
11			4.3 STREET ADDRESS			
CITY - ST - ZIP TITLE			4.4 CITY - ST - ZIP			
NAME		DELETE	51 TIFLE		☐ Char	nge 🔲 Addition
			5 2 NAME	40000100	നയാക	
STREET ADORESS			5.3 STREET ADDRESS	<b>40000186</b> -06/13/960101	400c	
CITY - ST - ZIP TITLE			54 CITY - ST - ZIF	***70.00	(10)	
		□ DELETE	61 THTLE	man I ti tilli	Chan	nge Addition
NAME			6 2 NAME		_	
STREET ADDRESS			6.3 STREET ADDRESS			
City-St-Zip  14. I do hereby certify that the information supplied with this filing is wallingarily furnished.			6 4 CITY - ST - ZIP			
ı⇔. IDO hereby	Certify that the information supplied	durith the fline is relieved if it				

4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 (813) 443-3251