


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006 8:00 am
Secretary of State

02-28-2006 90010 042 ****61.25

DOCUMENT # N95000004340 1. Entity Name AFFORDABLE HOUSING VENTURES, INC.					
Principal Place of Business 13839 US 98 BYPASS DADE CITY, FL 33525 US			Mailing Address 13839 US 98 BYPASS DADE CITY, FL 33525 US		
2. Principal Place of Business 37235 ORANGE VALLEY LANE #1 Suite, Apt. #, etc. DADE CITY, FL. City & State		3. Mailing Address P.O. Box 948 Suite, Apt. #, etc. DADE CITY, FL. City & State		02072006 Chg-NP CR2E037 (11/05)	
Zip 33525 Country USA		Zip 33526 Country USA		4. FEI Number 59-3333830	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent LITTLE, THOMAS C. E 2123 NE COACHMAN RD SUITE A CLEARWATER, FL 33575			7. Name and Address of New Registered Agent Name Virginia L. Solberg Street Address (P.O. Box Number is Not Acceptable) 37235 ORANGE VALLEY LANE #1 DADE CITY City FL Zip Code 33525		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Virginia L. Solberg</i> Virginia L. Solberg DATE 2/23/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORRILL, PENELOPE 37314 MERIDIAN AVE DADE CITY, FL 33525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMPTON, JOY 38008 MERIDIAN AVE DADE CITY, FL 33525	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CUMBEE, RALPH 36351 CLINTON AVENUE DADE CITY, FL 33525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. Finnerty, John 14033 8th Street DADE CITY, FL 33525	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STURWOLD, RAYMOND EARL 37407 MOORE DRIVE DADE CITY, FL 33525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DILLON, LINDA 36815 PERRY COURT DADE CITY, FL 33525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RIVERA-SINGLETERY, GEORGINA 39017 SOUTH AVENUE ZEPHYRHILLS, FL 33540	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRITTON, KATHERINE 15950 21 ST STREET DADE CITY, FL 33525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Penny Morrill</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 2/23/06 Daytime Phone # 352-521-3358		