2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003330

FILED Feb 28, 2011 Secretary of State

Entity Name: COMMUNITY PARTNERSHIP FOR HOMELESS, INC.

Current Principal Place of Business: New Principal Place of Business:

1550 N. MIAMI AVE. MIAMI, FL 33136 US

Current Mailing Address: New Mailing Address:

1550 NORTH MIAMI AVENUE 1550 N. MIAMI AVE. MIAMI, FL 33136 US MIAMI, FL 33136 US

FEI Number: 65-0425069 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VINCENT, H. DANIEL 1550 N MIAMI AVE MIAMI, FL 33136 US

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: C

Name: BELL, TRISH

Address: 457 LEUCADENDRA DRIVE City-St-Zip: CORAL GABLES, FL 33156

Title: TD

Name: HUSTON, JR., TOM
Address: 1121 MADRUGA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: SD

Name: LEWIS, LYNN B

Address: 1390 BRICKELL AVE. STE. 280

City-St-Zip: MIAMI, FL 33131

Title:

 Name:
 ERBAN, TOMAS

 Address:
 604 MALAGA AVENUE

 City-St-Zip:
 CORAL GABLES, FL 33134

Title: [

Name: BESTMAN, EVALINA DR.
Address: 1313 NW 36 STREET, SUITE 400

City-St-Zip: MIAMI, FL 33142

I hereby 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 all other like empowered.

SIGNATURE: H. DANIEL VINCENT DIR 02/28/2011