FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90212 027 ****96.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000007934

1. Entity Name
FIRST HOUSING ENTERPRISE, INC.

11034023

Principal Place of Business	Mailing Address
322 BANYAN BLVD. WEST PALM BEACH, FL 33401	P.O. BOX 4961 ORLANDO, FL 32802

2. Principal Place of Business	3. Mailing Address
422 7th Street	422 7th Street
Suite, Apt. #, etc.: Suite 2	Suite, Apt. #, etc.: Suite 2
City & State: West Palm Bch., FL	City & State: West Palm Bch., FL
Zip: 33401 Country: USA	Zip: 33401 Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-1075099 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 N. ORANGE AVENUE, SUITE 1100 ORLANDO, FL 32801	Name: Paula J. Ryan Street Address (P.O. Box Number is Not Acceptable): 422 7th Street, Suite 2 City: West Palm Beach, FL Zip Code: 33401

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 _____ 4/23/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 | 9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D BERMONT, PETER L 3427 NORTH MOORINGS WAY COCONUT GROVE, FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 422 7th Street, Suite 2 West Palm Beach, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NATHAN, MARTIN 1779 TIGER TAIL AVE. COCONUT GROVE, FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RYAN, PAULA 269 QUEENS LANE PALM BEACH, FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: _____ 4/23/03 561 838-8886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #