

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 17, 2017
Secretary of State
CC4108874774

Entity Name: AFFORDABLE HOMEOWNERSHIP FOUNDATION, INC.

Current Principal Place of Business:

5264 CLAYTON COURT - STE. 1
FORT MYERS, FL 33907

Current Mailing Address:

5264 CLAYTON COURT - STE. 1
FORT MYERS, FL 33907 US

FEI Number: 65-1046928

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILCOX, WILLIAM
5264 CLAYTON COURT
SUITE 1
FORT MYERS, FL 33907 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

Officer/Director Detail :

Title P D
Name WILCOX, WILLIAM
Address 5264 CLAYTON COURT
SUITE 1
City-State-Zip: FORT MYERS FL 33907

Title VP
Name ATKIN, HOWARD
Address 3004 SE 1ST AVE
City-State-Zip: CAPE CORAL FL 33904

Title DIRECTOR
Name PANCRATZ, GARRITT
Address 318 LANTERN LN.
City-State-Zip: NORTH FORT MYERS FL 33917

Title SECRETARY
Name RIVAS, ADAM
Address 5264 CLAYTON COURT
UNIT 1
City-State-Zip: FORT MYERS FL 33907

Title CEO
Name HEALY, LOIS M
Address 2330 ALDRIDGE AVE
City-State-Zip: FORT MYERS FL 33907

Title DIRECTOR
Name SHIPTON, BRIAN
Address 1830 CHERIE LN NORTH
City-State-Zip: FORT MYERS FL 33917

Title DIRECTOR
Name PETRULAVAGE, JUDY
Address 2905 S. DEL PRADO BLVD.#5
City-State-Zip: CAPE CORAL FL 33904

Title ST
Name HUTTO, KENNETH
Address 15491 SHAMROCK LN.
City-State-Zip: FORT MYERS FL 33912

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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: LOIS M HEALY

CEO

03/17/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KOLLAR, ELIZABETH
Address 1206 SW 11TH PL
City-State-Zip: CAPE CORAL FL 33991