

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000920

Entity Name: WINTER HAVEN HOUSING DEVELOPERS, INC.**Current Principal Place of Business:**2653 AVENUE C S.W.
WINTER HAVEN, FL 33880**Current Mailing Address:**2653 AVENUE C S.W.
WINTER HAVEN, FL 33880**FEI Number:** 20-8089378**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REED, ANDREW M. ESQ.
1611 HARDEN BLVD.
LAKELAND, FL 33803 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:** ANDREW M. REED, ESQ.

03/27/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|-----------------------|
| Title | D |
| Name | STANISLAUS, BREEZI |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

| | |
|-----------------|-----------------------|
| Title | D |
| Name | HOGAN, JAMES |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

| | |
|-----------------|-----------------------|
| Title | DV |
| Name | THOME, MURIEL |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

| | |
|-----------------|-----------------------|
| Title | DP |
| Name | HUDSON, JIMMIE LEE |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

| | |
|-----------------|-----------------------|
| Title | D |
| Name | HUDSON, JUDY |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

| | |
|-----------------|-----------------------|
| Title | ST |
| Name | LANDERS, LISA J |
| Address | 2653 AVENUE C S.W. |
| City-State-Zip: | WINTER HAVEN FL 33880 |

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: LISA LANDERS**SECRETARY**

03/27/2013

Electronic Signature of Signing Officer/Director Detail

Date