

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11653

Entity Name: FLORIDA COUNCIL FOR AFFORDABLE AND RURAL HOUSING, INC.**FILED**
Mar 10, 2016
Secretary of State
CC1516957946**Current Principal Place of Business:**1006 GROVE STREET
CLEARWATER, FL 33755**Current Mailing Address:**P O BOX
CLEARWATER, FL 33757**FEI Number: 59-2728794****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SUMMERS, GARY
380 WEST ALFRED STREET
TAVARES, FL 32778 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 DT
Name SIMONS, DAWN
Address 250 N BELCHER RD #100
City-State-Zip: CLEARWATER FL 33765Title D
Name BORTON, PAMELA K
Address 1006 GROVE ST
City-State-Zip: CLEARWATER FL 33755Title D
Name FLYNN, THOMAS F
Address 516 LAKEVIEW RD., UNIT 8
City-State-Zip: CLEARWATER FL 33756Title PD
Name MISCUK, RICHARD
Address 1006 GROVE STREET
City-State-Zip: CLEARWATER FL 33755Title D
Name LEWIS, NORINE
Address 3111 PACES MILL RD SUITE A250
City-State-Zip: ATLANTA GA 30339Title VP
Name MATHIS, CRYSTAL
Address 300 WEST DIXIE AVENUE
City-State-Zip: LEESBURG FL 34748Title DIRECTOR
Name FLYNN, KEVIN
Address 516 LAKEVIEW ROAD, UNIT 8
City-State-Zip: CLEARWATER FL 33756

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: RICHARD S. MISCUK**PRESIDENT****03/10/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date