


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 762242

1. Entity Name
FEDERATION HOUSING, INC.



Principal Place of Business 5010 NOB HILL RD. SUNRISE, FL 33351 US	Mailing Address 5010 NOB HILL RD. SUNRISE, FL 33351 US
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DO NOT WRITE IN THIS SPACE



01272006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2232035	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WEINBAUM, MARTIN
 5010 NOB HILL RD.
 SUNRISE, FL 33351**

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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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CANTOR, DANIEL 8411 LAGOS DE CAMPO TAMARAC, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WEINBAUM, MARTIN 5010 NOB HILL RD. SUNRISE, FL 33351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FINKELSTEIN, RICHARD 2520 LAGUANA TERR. FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LEHRER, PAUL R 4310 NE 23 TERRACE LIGHTHOUSE POINT, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLIAM, GERALD 5104 WHITE OAK LANE TAMARAC, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/22/06-80038-009 70.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Martin Weinbaum 1/27/06 954-746-7960
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #