

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 24, 2002 8:00 am**  
**Secretary of State**

01-24-2002 90208 039 \*\*\*150.00

**DOCUMENT # F01000001652**

**1. Entity Name**  
**NHP AFFORDABLE HOUSING CORPORATION AZZ**

**Principal Place of Business**  
**1675 PALM BEACH LAKES BLVD., SUITE 1002**  
**WEST PALM BEACH FL 33401**

**Mailing Address**  
**1675 PALM BEACH LAKES BLVD., SUITE 1002**  
**WEST PALM BEACH FL 33401**

800410



DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>		<b>4. FEI Number</b> 65-0945138		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
Zip	Country	Zip	Country				

**6. Name and Address of Current Registered Agent**

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

**7. Name and Address of New Registered Agent**

<b>Name</b>	
<b>Street Address (P.O. Box Number is Not Acceptable)</b>	
<b>City</b>	<b>FL</b> <b>Zip Code</b>

**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.**

**SIGNATURE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)</b> <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
--	---	---

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>V</b> <b>BARNES, JOHN R</b> <b>1675 PALM BEACH LAKES BLVD., SUITE 1002</b> <b>WEST PALM BEACH FL 33401</b> <input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>S</b> <b>ERBEY, JOHN R</b> <b>1675 PALM BEACH LAKES BLVD., SUITE 1002</b> <b>WEST PALM BEACH FL 33401</b> <input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>CD</b> <b>ERBEY, WILLIAM C</b> <b>1675 PALM BEACH LAKES BLVD., SUITE 1002</b> <b>WEST PALM BEACH FL 33401</b> <input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>P</b> <b>FARIS, RONALD M</b> <b>1675 PALM BEACH LAKES BLVD</b> <b>WEST PALM BEACH, FL 33401</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>SVP/CFO</b> <b>ZEIDMAN, MARK S</b> <b>1675 PALM BEACH LAKES BLVD</b> <b>WEST PALM BEACH, FL 33401</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>V/T</b> <b>CZOCHANSKI, THOMAS J</b> <b>1675 PALM BEACH LAKES BLVD</b> <b>WEST PALM BEACH, FL 33401</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

**13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:** *JOHN R BARNES* **JOHN R BARNES, SENIOR VP** **1/8/02** **561-682-8000**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment  
808413

Doc# F01000001652

**EXHIBIT A**

**Directors**

**William C. Erbey**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

**Officers**

**William C. Erbey**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Chairman and Chief Executive Officer

**Ronald M. Faris**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

President

**John R. Erbey**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Secretary

**John R. Barnes**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Senior Vice President

**Mark S. Zeidman**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Senior Vice President and Chief Financial Officer

**William B. Shepro**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Senior Vice President

**Thomas J. Czochanski**  
1675 Palm Beach Lakes Blvd.  
West Palm Beach, FL 33401

Vice President and Treasurer