

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

03/5720 AV

FILED

03 JAN 23 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CHECK HERE IF MAKING CHANGES

DOCUMENT # **F01000001652**



1. Entity Name
NHP AFFORDABLE HOUSING CORPORATION AZ2

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0945138**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V <input checked="" type="checkbox"/> Delete
NAME	BARNES, JOHN R
STREET ADDRESS	1675 PALM BEACH LAKES BLVD., SUITE 1002
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	S <input type="checkbox"/> Delete
NAME	ERBEY, JOHN R
STREET ADDRESS	1675 PALM BEACH LAKES BLVD., SUITE 1002
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	CD <input type="checkbox"/> Delete
NAME	ERBEY, WILLIAM C
STREET ADDRESS	1675 PALM BEACH LAKES BLVD., SUITE 1002
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	P <input type="checkbox"/> Delete
NAME	FARIS, RONALD M
STREET ADDRESS	1675 PALM BEACH LAKES BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	SVPC <input type="checkbox"/> Delete
NAME	ZEIDMAN, MARK S
STREET ADDRESS	1675 PALM BEACH LAKES BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33401
TITLE	VT <input checked="" type="checkbox"/> Delete
NAME	CZOCHANSKI, THOMAS J
STREET ADDRESS	1675 PALM BEACH LAKES BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33401

TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARK J. NICHOLS
STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	900010423419
STREET ADDRESS	01/22/03--01075--013 **150.00
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	VT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDREW G. DOKOS
STREET ADDRESS	1675 PALM BEACH LAKES BLVD.
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *MARK J. NICHOLS*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/03

561-682-8000

Date

Daytime Phone #

CR2E034 (10/02)