2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000048727

1. Entity Name

AFFORDABLE HOUSING NETWORK LLC



Principal Place of Business

3200 N FEDERAL HIGHWAY

#221

BOCA RATON, FL 33431 US

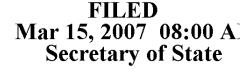
Mailing Address

3200 N FEDERAL HIGHWAY

#221

DO NOT WRITE IN THIS SPACE

BOCA RATON, FL 33431 L





03122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1309425

Applied For Not Applicable

5. Certificate of Status Desired

X 5:

DATE

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

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

GUALTIERI, FRANK 2721 NW 28TH TERRACE BOCA RATON, FL 33434

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	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 accepted obligations of registered agent.	pt
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SI	GNATURE	

(NOTE, Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS					
TITLE	MGRM					
NAME	CUPELLI, RICHARD					
STREET ADDRESS	3200 NORTH FEDERAL HIGHWAY					
CITY-ST-ZIP	BOCA RATON, FL 33431					
TITLE	MGRM					
NAME	GUALTIERI, FRANK					
STREET ADDRESS	2721 NW 28TH TERRACE					
CITY-ST-ZIP	BOCA RATON, FL 33434					
TITLE	MGRM					
NAME	KIELBANIA, KENNETH					
STREET ADORESS	1209 NW 16TH ST					
CITY-ST-ZIP	BOCA RATON, FL 33486					
TITLE						
NAME	•					
STREET ADDRESS						
CITY-SI-ZIP						
TITLE						
NAME						
STREET ADDRESS						
CITY-ST-ZIP						
TITLE						
* NAME						
STREET ADDRESS						
CITY-ST-ZIP ,						
11 I hereby	partify that the information currelied with this filing does not qualify for the ex-					

U00000668462 03/27/07-80032-008 55.00

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver on rustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #