2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # N00000003412

1. Entity Name
VF AFFORDABLE HOUSING, INC.

Principal Place of Business	Mailing Address
~~4401 EMERSON STREET~~ ~~JACKSONVILLE, FL 32207~~	~~4401 EMERSON STREET~~ ~~JACKSONVILLE, FL 32207~~

2. Principal Place of Business	3. Mailing Address
500 N. Maitland Ave.	P.O. Box 4961
Suite, Apt. #, etc. Suite 103	Suite, Apt. #, etc.
City & State Maitland FL	City & State Orlando, FL
Zip 32751 Country USA	Zip 32802 Country USA

04052004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-3652879
☐ Applied For
☐ Not Applicable

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
~~ETTLINGER, CAROLYN~~ ~~4401 EMERSON STREET~~ ~~JACKSONVILLE, FL 32207~~	Name: B+C Corporate Services of Central Florida, Inc. Street Address (P.O. Box Number is Not Acceptable) 390 N. Orange Ave. Suite 1100 City: ORLANDO FL Zip Code: 32801

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.

B+C CORPORATE SERVICES OF CENTRAL FLORIDA, INC.

SIGNATURE _____ DATE 4/5/04

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

ROBYN L. NOREN, VICE PRES.

Filing Fee is $61.25
Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DULOS, MICHEAL 6111 N. GAZEDO PARK PL JACKSONVILLE, FL 32207	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Casper, Janaka, L. 930 Cambria Street NE Christianburg, VA 24073	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BISHOP, BEN 1855 WELLS RD, SUITE 1 ORANGE PARK, FL 32073	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Adams, Robert J. 1520 West Main Street, Suite 200 Richmond, VA 23220	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KOEBEL, THEODORE CENTER FOR HOUSING RESEARCH VA.TECH M-0451 BLACKSBURG, VA 24061	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T Reed, Jeffrey K. 930 Cambria Street NE Christianburg, VA 24073	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LEACH, HUGH U 1416 CRESTVIEW DRIVE BLACKSBURG, VA 24060	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Council, Patrick 1119 Brooks Court Blacksburg, VA 24060	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, JANE 301 S COLLEGE TW-27 CHARLOTTE, NC 282880570	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Hanna, Dixon 330 Burrus Hall Blacksburg, VA 24061	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEVENS, DWAINE 9786 BEAVER ST. JACKSONVILLE, FL 32220	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Gooden, Susan 400 Cedar Orchard Drive Blacksburg, VA 24060	☐ Change ☒ Addition

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 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: _____ 4/13/04 804-278-9789

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Robert J. Adams, Vice President