

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# N01000000125

Entity Name: HOUSING AUTHORITY OF POMPANO BEACH AFFORDABLE HOUSING CORPORATION

Current Principal Place of Business:

321 W ATLANTIC BLVD
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2006
POMPANO BEACH, FL 330612006

New Mailing Address:

FEI Number: 65-1110240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADDERLY, RALPH W
321 W ATLANTIC BLVD
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: POITER, WOODROW
Address: 901 NW 4TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: DV () Delete
Name: GLENN, JIMMIE
Address: 416 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: RHONE, CAROLYN
Address: 780 N.E. 23 TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: SUTTON, GLADYS
Address: 2731 N.E. 2 TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: HEATH, WILLIE R
Address: 1651 NW 6TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MCDUGAL, KEVIN
Address: 632 NW 21ST COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: CD (X) Change () Addition
Name: GLENN, JIMMIE
Address: 416 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: SUTTON, GLADYS
Address: 2731 N.E. 2 TERRACE
City-St-Zip: POMPANO BEACH, FL 33064

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH W. ADDERLY

Electronic Signature of Signing Officer or Director

RA

01/22/2009

Date