


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90253 001 ***140.00

DOCUMENT # N01000001006
 1. Entity Name
URBAN LEAGUE HOUSING FOUNDATION, INC.



Principal Place of Business 8500 NW 25 AVE MIAMI, FL 33147	Mailing Address 8500 NW 25 AVE MIAMI, FL 33147
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DO NOT WRITE IN THIS SPACE

03092006 No Chg-NP CR2E037 (11/05)

4. FEI Number
20-1493270 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

WASHINGTON, LYNN C
 701 BRICKELL AVE, STE 2800
 MIAMI, FL 33131

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

Filing Fee is \$61.25 Due by May 1, 2006

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FAIR, TALMADGE W 8500 NW 25 AVE MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, CORDELL 8500 NW 25 AVE MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAYNE, LINDA 8500 NW 25 AVE MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 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: *Talmadge W. Fair* **04/19/06** (305) 696-4450
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

TALMADGE W. FAIR