

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002130

FILED
Mar 11, 2008
Secretary of State

Entity Name: CENTRAL FLORIDA BETA HOUSING CORPORATION

Current Principal Place of Business:

1724 33RD ST STE 200
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 141241
ORLANDO, FL 328141241

New Mailing Address:

FEI Number: 59-3714529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARMER, DANIEL H
903 FERN AVE
ORLANDO, FL 32814 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: PSTD () Delete
Name: FARMER, DANIEL H
Address: 903 FERN AVE
City-St-Zip: ORLANDO, FL 32814

Title: D () Delete
Name: BAUER, CHRIS
Address: P O BOX 2500
City-St-Zip: ORLANDO, FL 32816

Title: D () Delete
Name: HARTLEY, CARL W JR
Address: 200 S ORANGE AVE
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: DANIEL H. FARMER

MR.

03/11/2008

Electronic Signature of Signing Officer or Director

Date