2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

09-04-2003 90063 020 ****61.25 N01000006131

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DOCUMENT # N0100006131					LUNE	FILEU IARY OF 3 OF CORPOR	7. i 16 is			
FAIR HOUSING COUNCIL OF CENTRAL FLORIDA, INC.					03 NOV	ur.corpof 1 0 ahu	RATIO-			
Principal Pla	ice of Business	Mailing Address			-0 NO g	IU AH II	:51			
, ,		570 AVE J SE	AVE J SE							
WINTER HAVEN FL 33880 WINTER HAVEN FL 338										
				_]	1)9 0 011 111 0 11 0 11 01 1	<u> </u>	Y)	USB SVALKADO		
2. Principal Place of Business		3. Mailing Address				101 (56) TOWN (41) TO)(10 0 1			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4//		MAKING CHANGES		_	
City & State		City & State			4. FEI Number	5-052	4684 N	oplied For ot Applicable	<u>-</u>	
Zip	6. Name and Address of Current F	Zip	Country		5. Certificate of St	atus Desired	Fee Require			
	Name		7. Name and Add	ress of New Reg			\dashv			
RI IRNHA										
BURNHAM, PERRY 1109 11TH COURT, NE			Street	Street Address (P.O. Box Number is Not Acceptable)						
WINTER HAVEN FL 33881										
	•		City			•	FL Zip Cod	e	1	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in							a. I am familiar with,	and accept	7	
the obliga	tions of registered agent.									
SIGNATURE	<u> </u>									
· · ·	Signature, typed or printed name of registered agent a	nd titte if appticable. (NOTE:	Registered Agent signa	ture required v	rhen minsteong)		DATE	<u> </u>		
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5						Moka	Check Payable	to .		
After Sep	ntribution.		\$5.00 May Be Added to Fees		Department of S					
10. 5 %	OFFICERS AND DIR	ECTORS	T 11.	Δ1	DOITIONS (CHANGE	S TO DEE/CERS	AND DIRECTORS IN	10	-}	
TITLE "	D	☐ Delete	TITLE	150			☐ Channe	Addition	ଞ୍ଚ	
NAME	BURNHAM, PERRY		NAME	WOO	dard, 09	TYICK	~ N/W		4	
STREET ADDRESS CITY-ST-ZIP	1109 11TH COURT NE WINTER HAVEN FL 33881		STREET ADDRESS CITY-ST-ZIP	270	dard De o Edylr ter Have	1 5/ 3	3891		CR2E037 (4/03)	
TITLE	D	☐ Deleie	TITLE	w.m	I CT 1/6/A	11, 100	☐ Change	☐ Addition	- R	
NAME	POTTER, JEFFREY		NAME	ſ] -	
	637 1ST STREET SW	·	STREET ADORESS CITY-ST-ZIP	1	•				}	
CITY-ST-ZIP	WINTER HAVEN FL 33880	D Delete	TITLE	 	<u> </u>	<u> </u>	,	☐ Addition	1	
NAME	WYNN, LEVONIA	C) Desert	NAME	1	•	'mar = " ,	ک مینون است. مانان است.	C Applica		
STREET ADDRESS	504 PRADO PLACE		STREET ADDRESS							
CITY-ST-ZIP	LAKELAND FL 33803		CITY-ST-ZIP	 					4	
TITLE NAME	HILL, RON	C Oelete	TITLE NAME	ł			☐ Change	Addition	1	
STREET ADDRESS	43225 WOODRIDGE DRIVE		STREET ADDRESS	[ĺ	
CITY-ST-ZIP	PLANT CITY FL 33868		CITY-ST-ZIP						1	
TITLE NAME	DCT FULSE, BERNARD	C) Delets	TITLE NAME	}		•	Change	Addition	}	
STREET ADDRESS	6072 WATERWOOD PATH		STREET ADDRESS		,					
CITY-ST-ZIP	BARTOW FL 33830		CITY-ST-ZIP							
TITLE	D REPONE	☐ Delete	TITLE				☐ Change	Addition		
name Street address	MAJOR, JEROME 963 EAST MEMORIAL BLVD		NAME Street Address	}						
CITY - ST-ZIP	LAKELAND FL 33801		CITY-ST-ZIP							

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 cath; 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: SIGNATURE AND TYPED OR PRINTED NAME OF PRINTING OFFICER OR DIRECTOR

299-5058 <u>8/29/03(863)29</u>Krc