2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01755

FILED Jan 24, 2007 Secretary of State

Entity Name: ASSOCIATION OF FLORIDA COMMUNITY DEVELOPERS, INC.

Current Principal Place of Business: New Principal Place of Business: 307 WEST PARK AVENUE, SUITE 214 TALLAHASSEE, FL 32301 **Current Mailing Address: New Mailing Address:** 307 WEST PARK AVENUE, SUITE 214 TALLAHASSEE, FL 32301 FEI Number: 59-2372741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNTER, WILLIAM D PRES 307 WEST PARK AVENUE, SUITE 214 TALLAHASSEE, FL 32301 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCMUNN, WILLIAM Name: Name: Address: P.O. BOX 10809 Address: City-St-Zip: DAYTONA BEACH, FL 32120 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HUNTER, WILLIAM D Name: Address: 307 WEST PARK AVENUE, SUITE 214 Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: STD () Delete Title: () Change () Addition WATTS, SUSAN Name: Name: 9990 COCONUT ROAD, SUITE 200 Address: Address: City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: DANAHY, THOMAS Name: DANAHY, THOMAS 6215 LORRAINE ROAD 14400 COVENANT WAY Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: BRADENTON, FL 34202

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM D. HUNTER P 01/24/2007