## 2005 NOT-FOR-PROFIT CORPORATION

## Apr 11, 2005 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # N02000006417 04-11-2005 90157 022 \*\*\*\*70.00 PALM BEACH COUNTY AFFORDABLE HOUSING COLLABORATIVE, INC. V I U A V U V F Principal Place of Business Mailing Address 100 NORTH CONGRESS AVENUE P.O. BOX 1726 BOYNTON BEACH, FL 33426 WEST PALM BEACH, FL 33402 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212005 Chg-NP CR2E037 (10/03) Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CARITON MITH WILLIAMS, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 100 NORTH CONGRESS AVENUE BOYNTON BEACH, FL 33426 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 dgent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing Make check payable to Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due by May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete Change TITLE TITLE ☐ Addition CARLTON SMITH 423 FERN STREET, SUITE 200 WILLIAMS, MICHAEL NAME STREET ADDRESS 100 NORTH CONGRESS AVENUE STREET ADDRESS WEST PALM BEACH, FL 33401 BOYNTON BEACH, FL 33426 CITY-ST-7IP CITY-ST-70P Delete Addition TITLE ☐ Change TITLE LAURA STEMPLE NAME SMITH, CARLTON NAME 127 NORTH CONGRESS AVENUE BOYNTON BEACH, FL 33426 423 FERN STREET, STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME SNYDER, SONIA NAME 205 DATURA STREET, 10TH FLOOR STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NICULESCU, SIMONA NAME 2201 W HILLSBORO BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL 33442 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS 3 - 3 CITY-ST-ZIP 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 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

☐ Delete

☐ Change

■ Addition

**FILED**