2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 27, 2006 8:00 am Secretary of State

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Daytime Phone #

DOCUMENT # N02000006417 PALM BEACH COUNTY AFFORDABLE HOUSING COLLABORATIVE, INC. Principal Place of Business Mailing Address 100 NORTH CONGRESS AVENUE P.O. BOX 1726 WEST PALM BEACH, FL 33402 BOYNTON BEACH, FL 33426 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142006 Cha-NP CR2E037 (11/05) City & State City & State FEI Number NOT APPLICABLE Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, CARLTON 423 FERN STREET, Street Address (P.O. Box Number is Not Acceptable) SUITE 200 WEST PALM BEACH, FL 33401 City Zip Code 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 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. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME SMITH, CARLTON NAME STREET ADDRESS 423 FERN STREET, SUITE 200 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP VP TITLE Delete TITLE ☐ Change ☐ Addition STEMPLE, LAURA NAME NAME 127 NORTH CONGRESS AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33426 CITY-ST-ZIP TITLE XX Delete TITLE ☐ Change XXAddition Treasurer NAME SNYDER, SONIA NAME Lucy A. Carr 205 DATURA STREET, 10TH FLOOR STREET ADDRESS STREET ADDRESS West Palm Beach, FL 33401 205 Datura St. CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP SD TITLE ☐ Change TITLE Delete ☐ Addition NICULESCU, SIMONA NAME NAME 2201 W HILLSBORO BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH, FL 33442 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.