

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006417

FILED  
Mar 06, 2009  
Secretary of State

**Entity Name:** PALM BEACH COUNTY AFFORDABLE HOUSING COLLABORATIVE, INC.

**Current Principal Place of Business:**

100 NORTH CONGRESS AVENUE  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

2600 QUANTUM BLVD  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

P.O. BOX 1726  
WEST PALM BEACH, FL 33402

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, CARLTON  
423 FERN STREET,  
SUITE 200  
WEST PALM BEACH, FL 33401 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: P ( ) Delete  
Name: DANIEL, GIBSON  
Address: 2600 QUANTUM BLVD  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VP ( ) Delete  
Name: CARLETON, SMITH  
Address: 423 FERN STREET, SUITE 200  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: T ( ) Delete  
Name: CARR, LUCY A  
Address: 205 DATURA ST  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD ( ) Delete  
Name: NICULESCU, SIMONA  
Address: 2201 W HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33442

**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:

Title: SD (X) Change ( ) Addition  
Name: HARDCASTLE, CHRISTIE  
Address: 700 S DIXIE HIGHWAY  
City-St-Zip: WEST PALM BEACH, FL 33401

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: LUCY A CARR

T

03/06/2009

Electronic Signature of Signing Officer or Director

Date