


**2007 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT**

FILED

07 AUG -9 AM 10:40

STATE
MIAMI, FLORIDA

DOCUMENT # N03000006718					
1. Entity Name ST. AGNES HOUSING CORPORATION					
Principal Place of Business 2031 NW 4TH COURT MIAMI, FL 33127		Mailing Address 2031 NW 4TH COURT MIAMI, FL 33127			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 01-0812234	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LITTLE, JOHN LEGAL SERVICES OF GREATER MIAMI 3000 BISCAYNE BLVD., SUITE 500 MIAMI, FL 33137			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		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 the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEPBURN, ARNETTE Treasurer 1750 N W 3RD AVE. MIAMI, FL 33136		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Lionel Ferguson Board Member <input checked="" type="checkbox"/> Addition 1115 Northwest 50th Street Miami, FL 33127	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATHIS, MALVERN Board Member 1750 N W 3RD AVE. MIAMI, FL 33136		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Atty Robert McKinney, President <input checked="" type="checkbox"/> Addition 1750 NW 3rd Avenue Miami, FL 33136	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDERS, JANIS Board Member 1750 N W 3RD AVE. MIAMI, FL 33136		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Anthony L. Jackson, CPA . Board Member <input checked="" type="checkbox"/> Addition 1525 NW 167th Street Miami, FL 33169	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Carolyn Clear, Secretary <input type="checkbox"/> Delete 15620 NW 28th Place Miami, FL 33054		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition 200108026252 08/14/07--01010--010 ***70.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Elston Davis, Vice-President <input type="checkbox"/> Delete 3261 Northwest 43rd Terrace Miami, FL 33142		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	George Davis Board Member 3050 Northwest 70th Terrace Miami, FL 33147		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition	
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.					
SIGNATURE: <i>Lucille Rich</i>		ACTING DIRECTOR		Date: 305-573-6885	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	