2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# N03000009859

Entity Name: THE JEFFERY A. MASSEY FLORIDA IOTA HOUSING CORPORATION

Current Principal Place of Business:

P.O. BOX 5306
WINTER PARK, FL 32792 US

New Principal Place of Business:

12108 DARWIN DRIVE
ORLANDO, FL 32807 US

Current Mailing Address:

P.O. BOX 5306
WINTER PARK, FL 32792 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

ROBINSON, SHAWN H
3032 HARTLAND CT
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

ROBINSON, SHAWN H
7541SUNTREE CIRCLE
129
ORLANDO, FL 32807 US

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: _____ 04/30/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	JOHNSON, BARRETT	
Address:	806 EMERALD LANE	
City-St-Zip:	ORLANDO, FL 32801 US	
Title:	VP	( ) Delete
Name:	MARK, FRANKENFIELD	
Address:	12018 GHENT COURT	
City-St-Zip:	ORLANDO, FL 32825 US	
Title:	S	( ) Delete
Name:	ROBINSON, SHAWN H	
Address:	3032 HARTLAND CT	
City-St-Zip:	ORLANDO, FL 32825 US	
Title:	T	( ) Delete
Name:	BILL, BARTO	
Address:	1652 VICTORIA WAY	
City-St-Zip:	WINTER GARDEN, FL 34787 US	
Title:	T	( ) Delete
Name:	MEHLER, ROBERT	
Address:	1336 ANDES DR.	
City-St-Zip:	WINTER SPRINGS, FL 32708 US	
Title:	T	( ) Delete
Name:	GROTT, WILLIAM	
Address:	605 MASTHEAD CT.	
City-St-Zip:	TAMPA, FL 33602 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	S	(X) Change ( ) Addition
Name:	ROBINSON, SHAWN H	
Address:	7541 SUNTREE CIRCLE APT 129	
City-St-Zip:	ORLANDO, FL 32807 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: SHAWN H ROBINSON S 04/30/2007
Electronic Signature of Signing Officer or Director — Date