

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009023

FILED
Feb 27, 2006
Secretary of State

Entity Name: THA AFFORDABLE HOUSING DEVELOPMENT CORPORATION

Current Principal Place of Business:

1529 MAIN ST.
TAMPA, FL 33607

New Principal Place of Business:

1529 W. MAIN ST.
TAMPA, FL 33607

Current Mailing Address:

1529 MAIN ST.
TAMPA, FL 33607

New Mailing Address:

1529 W. MAIN ST.
TAMPA, FL 33607

FEI Number: 81-0655939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILMORE, RICARDO L ESQ.
201 E. KENNEDY BLVD., SUITE 600
TAMPA, FL 33602 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: PD () Delete
Name: SHIMBERG, ROBERT
Address: 1529 W.MAIN ST.
City-St-Zip: TAMPA, FL 33607

Title: VD () Delete
Name: HARVEY, HAZEL
Address: 1529 W.MAIN ST.
City-St-Zip: TAMPA, FL 33607

Title: SED () Delete
Name: RYANS, JEROME
Address: 1529 W.MAIN ST.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: WHITE, GERALD
Address: 1529 W. MAIN.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: PEOPLES, KAREN
Address: 1529 W. MAIN.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: WELLS, SYBIL K
Address: 1529 W. MAIN.
City-St-Zip: TAMPA, FL 33607

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: () Change () Addition
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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 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: ROBERT SHIMBERG

P

02/27/2006

Electronic Signature of Signing Officer or Director

Date