# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 05, 2008**
**Secretary of State**

DOCUMENT# N04000009023

**Entity Name:** THA AFFORDABLE HOUSING DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

1529 W. MAIN ST.
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

1529 W. MAIN ST.
TAMPA, FL 33607

**New Mailing Address:**

**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: ALVAREZ, M G
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
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: ANDY LIBBY, JR CFO 03/05/2008

Electronic Signature of Signing Officer or Director — Date