

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007061

FILED
Jul 08, 2008
Secretary of State

Entity Name: TAMPA HOUSING FUNDING CORPORATION

Current Principal Place of Business:

1529 W. MAIN STREET
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1529 W. MAIN STREET
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-3350724 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GILMORE, RICARDO L ESQ
201 EAST KENNEDY BOULEVARD
SUITE 600
TAMPA, FL 33602 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D () Delete
Name: PADGETT, RUBIN E
Address: 1529 W. MAIN STREET
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: D (X) Change () Addition
Name: SCRIVEN, LAWRENCE
Address: 1529 W. MAIN STREET
City-St-Zip: TAMPA, FL 33607

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: ANDREW LIBBY JR.

CFO

07/08/2008

Electronic Signature of Signing Officer or Director

Date