

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000010918

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** FAITH AFFORDABLE HOUSING AND COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

10618 VERSAILLES BLVD  
WELLINGTON, FL 33449

**New Principal Place of Business:**

**Current Mailing Address:**

10618 VERSAILLES BLVD  
WELLINGTON, FL 33449

**New Mailing Address:**

P.O. BOX 542204  
GREENARES, FL 33454

**FEI Number:** 26-3855692      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

DAVIS, CAROLYN F  
10618 VERSAILLES BLVD  
WELLINGTON, FL 33449      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:** CVT  
**Name:** DAVIS, CAROLYN F  
**Address:** 10618 VERSAILLES BLVD  
**City-St-Zip:** WELLINGTON, FL 33449

**Title:** S  
**Name:** JEFFERSON, MERCEDES L  
**Address:** 2255 LINDELL BLVD  
**City-St-Zip:** DELRAY, FL 33444

**Title:** D  
**Name:** JEFFERSON, JUAN R  
**Address:** 8188 PEAKWOOD COURT, #12  
**City-St-Zip:** MANASSAS, VA 20111

I hereby 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 all other like empowered.

SIGNATURE: CAROLYN F. DAVIS

CVT

05/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date