

FILE NOW: FILING FEE IS \$61.25

FILED  
May 09 1997 8:00am  
Secretary of State

|                                                          |                                                                                   |                                                                                                           |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1997</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

DOCUMENT # **N11653** (5)

1. Corporation Name

**FLORIDA COUNCIL FOR AFFORDABLE AND RURAL HOUSING, INC.**



Principal Place of Business

Mailing Address

**250 N BELCHER RD  
S100  
CLEARWATER FL 34625**

**250 N BELCHER RD  
S100  
CLEARWATER FL 34625-2622**

3. Date Incorporated or Qualified  
**10/18/1985**

3a. Date of Last Report  
**04/26/1996**

2. Principal Place of Business

2a. Mailing Address

**21** Suite, Apt. #, etc.

**26** Suite, Apt. #, etc.

**22** City & State

**27** City & State

**23** Zip Country

**28** Zip Country

**24** **25**

**29** **30**

4. FEI Number  
**59-2728794**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCMILLAN, JOHN  
9385 N. 58TH STREET #200  
TEMPLE TERRACE FL 33617**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE  
NAME **FLYNN, THOMAS**  
STREET ADDRESS **2424 ENTERPRISE RD**  
CITY-ST-ZIP **CLEARWATER FL**

1.1 TITLE **PD** ☐ Change ☒ Addition  
1.2 NAME **BARRY SWARTS**  
1.3 STREET ADDRESS **1002 West 23rd St #400**  
1.4 CITY-ST-ZIP **Panama City FL 32405**

TITLE **VD** ☐ DELETE  
NAME **CURTIS, JOHN**  
STREET ADDRESS **11635 NW 1ST AVE**  
CITY-ST-ZIP **GAINESVILLE FL**

2.1 TITLE **SD** ☐ Change ☒ Addition  
2.2 NAME **Toni Stephens**  
2.3 STREET ADDRESS **678 West Bay St**  
2.4 CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE **TD** ☐ DELETE  
NAME **MORRIS, GEORGE E.**  
STREET ADDRESS **250 N BELCHER RD #100**  
CITY-ST-ZIP **CLEARWATER FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **SD** ☒ DELETE  
NAME **HABER, FLORA JO**  
STREET ADDRESS **300 W. DIXIE**  
CITY-ST-ZIP **LEESBURG FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **VD** ☒ DELETE  
NAME **MCCABE, DAVID P.**  
STREET ADDRESS **601 CLEVELAND STREET, SUITE 930**  
CITY-ST-ZIP **CLEARWATER FL**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]*

CR2E037 (9/96)