

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12533

FILED
May 01, 2006
Secretary of State

Entity Name: PHOENIX HOUSING FOUNDATION, INC.

Current Principal Place of Business:

6025 N.W. 6TH CT.
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

6025 N.W. 6TH CT.
MIAMI, FL 33127

New Mailing Address:

C/O ARNALDO VELEZ, P.A.
CORAL GABLES, FL 33134

FEI Number: 59-2709344 **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:

SCOTT, CALVIN
6025 N.W. 6TH CT.
MIAMI, FL 33150 US

Name and Address of New Registered Agent:

ARNALDO VELEZ, P.A.
35 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: ARNALDO VELEZ

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCOTT, CALVIN
Address: 11105 SW 200 STREET #311
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: WALKER, JOEY
Address: 18326 NW 44TH PLACE
City-St-Zip: MIAMI, FL 33055

Title: TD () Delete
Name: DONOVAN, DELVIN
Address: 30055 SW 158TH COURT
City-St-Zip: HOMESTEAD, FL 33033

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCOTT, CALVIN
Address: C/O ARNALDO VELEZ, P.A.
City-St-Zip: CORAL GABLES, FL 33134

Title: P/D (X) Change () Addition
Name: NUNEZ, RAFAEL
Address: C/O ARNALDO VELEZ, P.A.
City-St-Zip: CORAL GABLES, FL 33134

Title: S/D (X) Change () Addition
Name: NUNEZ, MICHELLE
Address: C/O ARNALDO VELEZ, P.A.
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Change (X) Addition
Name: BIANCHI, PETER C JR.
Address: C/O ARNALDO VELEZ, P.A.
City-St-Zip: CORAL GABLES, FL 33134

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: PETER C. BIANCHI, JR

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date