## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

## Mar 17, 2003 8:00 am Secretary of State **DOCUMENT # N35066** 1. Entity Name 03-17-2003 91073 022 \*\*\*\*70.00 MID-FLORIDA HOUSING PARTNERSHIP, INC. Principal Place of Business Mailing Address 330 NORTH ST PO BOX 1345 DAYTONA BCH FL 32114 DAYTONA BCH FL 32114-1345 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAPINS HARRY HALE, KAREN Street Address (P.O. Box Number is Not Acceptable) 527 Beville Pa 1239 OCEANSHORE 8A ORMOND BEACH FL 32176 DAYTONA 8. 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE Delete TITLE **X** Change Addition NAME HALE, KAREN HARRY LAPINS 527 Beville PD NAME STREET ADDRESS 1239 OCEANSHORE 8A STREET ADDRESS CITY-ST-7IP **ORMOND BEACH FL 32176** CITY-ST-ZIP South Daytona FL 32119 TD TITLE □ Delete TITLE Addition GORDON, FRANCINE NAME NAME STREET ADDRESS 330 NORTH ST STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL CITY-ST-ZIP . □ Delete = TITLE SD----**C**Change ☐ Addition HARTMAN, MARIE NAME 301 S RIDGEWOOD AVE STREET ADDRESS STREET AUDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MCCRANIE, DAVID ANITA HASTINGS NAME STREET ADDRESS 2240 S VOLUSIA AVE 301 FLAGLER AVE STREET ADDRESS CITY-ST-ZIP ORANGE CITY FL 32774 CITY-ST-ZIP NEW SMYRNA BCH, FL Delete TITLE VD X Addition NAME HAILE, ROSE NAME CYNDI HUGHES STREET ADDRESS 840 CENTER AVE #75 STREET ADDRESS 2900 S. ATLANTIC AVE CITY-ST-ZIP HOLLY HILL FL 32117 CITY-ST-7IP DAYTONA BCH, SHORES TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS

12. I 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 report or supplemental 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 changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

3/5/03

FILED