

FILE NOW: FILING FEE IS \$61.25

FILED
May 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N45302** (9)
1. Corporation Name
SOUTH FLORIDA AFFORDABLE HOUSING CORPORATION



Principal Place of Business 1615 HOLLYHOCK ROAD WELLINGTON FL 33414 US	Mailing Address 1615 HOLLYHOCK ROAD WELLINGTON FL 33414 US
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2. Principal Place of Business 21 534 Datura Street Suite, Apt. #, etc.	2a. Mailing Address 26 534 Datura Street Suite, Apt. #, etc.
22 City & State 23 West Palm Beach FL	27 City & State 28 West Palm Beach, FL
24 Zip 33401	25 Country Palm Beach
29 Zip 33401	30 Country USA

3. Date Incorporated or Qualified 09/25/1991	Applied For ☐ Not Applicable
4. FEI Number 65-0300011	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent GLUCKMAN, JOSEPH 1615 HOLLYHOCK RD W PALM BEACH FL 33414	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	☒ DELETE
NAME	STO HUNTER, STEVEN
STREET ADDRESS	7025 182ND ROAD NORTH
CITY-ST-ZIP	JUPITER FL
TITLE	☒ DELETE
NAME	PD HUDNELL, CHARLES
STREET ADDRESS	1203 WESTCHESTER DR EAST
CITY-ST-ZIP	WEST PALM BEACH FL
TITLE	☒ DELETE
NAME	VPD BROWN, SHEHRY
STREET ADDRESS	5100 45TH STREET #2F
CITY-ST-ZIP	WEST PALM BEACH FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	PSD Gluckman, Joseph
1.3 STREET ADDRESS	1615 Hollyhock Rd
1.4 CITY-ST-ZIP	Wellington, FL 33414
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	TD Karen Rosen
2.3 STREET ADDRESS	534 Datura Street
2.4 CITY-ST-ZIP	West Palm Beach, FL 33401
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	KPD Gluckman, Lisa
3.3 STREET ADDRESS	534 Datura Street
3.4 CITY-ST-ZIP	W. Palm Beach, FL 33401
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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: *Joseph Gluckman* 5/11/98 51-659-9330

CR2E037 (10/97)