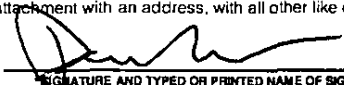


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2005 8:00 am
Secretary of State

03-03-2005 90178 046 ****61.25

DOCUMENT # N45302 1. Entity Name SOUTH FLORIDA AFFORDABLE HOUSING CORPORATION					
Principal Place of Business 12865 W. DIXIE HWY STE. #102 MIAMI, FL 33161 US			Mailing Address 12865 W. DIXIE HWY STE. #102 MIAMI, FL 33161 US		
2. Principal Place of Business 4181 N.W. 1ST AVE. Suite, Apt. #, etc. SUITE #5 City & State BOCA RATON, FL. Zip Country 33431-4266 PALM BEACH		3. Mailing Address 4181 N.W. 1ST AVE. Suite, Apt. #, etc. SUITE #5 City & State BOCA RATON, FL. Zip Country 33431-4266 PALM BEACH			
02232005 Chg-NP CR2E037 (10/03)				4. FEI Number 65-0300011	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent MEE, DENNIS 12927 BANYAN RD. MIAMI, FL 33181			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MEE, DENNIS 12927 BANYAN RD. MIAMI, FL 33181	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEPHENSON, DIANA 10160 OLEANDER CT. PEMBROKE PINES, FL 33026	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWARTZBAUM, STEVEN 1940 NE 124TH ST. MIAMI, FL 33181	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRIS, ERIN 107 NW 93RD AVE. PEMBROKE PINES, FL 33024	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 03/01/05 Daytime Phone # (561) 662-2160					