

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000002495

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** COMMUNITY HOUSING AND SHELTER FOUNDATION INC.

**Current Principal Place of Business:**

12555 ORANGE DRIVE SUITE 218  
DAVIE, FL 33330 US

**New Principal Place of Business:**

**Current Mailing Address:**

12555 ORANGE DRIVE SUITE 218  
DAVIE, FL 33330 US

**New Mailing Address:**

**FEI Number:** 65-0501543

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHEIBER, FRITZ  
121 NW PLEASANT GROVE WAY  
PORT SAINT LUCIE, FL 34986 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** SEBASTAIN, MARK  
**Address:** C/O 12555 ORANGE DR. STE 2A  
**City-St-Zip:** DAVIE, FL 33330

**Title:** D  
**Name:** MCLAUGHLIN, TIMOTHY  
**Address:** C/O 12555 ORANGE DR. STE 2A  
**City-St-Zip:** DAVIE, FL 33330

**Title:** D  
**Name:** DAVIS, ANTHONY  
**Address:** C/O 12555 ORANGE DR. STE 2A  
**City-St-Zip:** DAVIE, FL 33330

I hereby 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 all other like empowered.

**SIGNATURE:** FRITZ SCHEIBER

EXDR

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date