2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004340

FILED Feb 24, 2010 Secretary of State

Entity Name: WORKFORCE HOUSING VENTURES, INC.

Current Principal Place of Business: New Principal Place of Business:

36739 STATE ROAD 52, STE 206 DADE CITY, FL 33525 US

Current Mailing Address: New Mailing Address:

P.O BOX 948

DADE CITY, FL 33526 US

FEI Number: 59-3333830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AUVIL, JONATHAN L ESQUIRE 37837 MERIDIAN AVE. SUITE 100 DADE CITY, FL 33525 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

in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: MORRILL, PENELOPE
Address: 37314 MERIDIAN AVE
City-St-Zip: DADE CITY, FL 33525 US

Title: VPD

Name: CUMBEE, RALPH
Address: 36351 CLINTON AVENUE
City-St-Zip: DADE CITY, FL 33525 US

Title: TD

Name: STURWOLD, RAYMOND EARL
Address: 37407 MOORE DRIVE
City-St-Zip: DADE CITY, FL 33525 US

Title:

Name: AUVIL, JONATHAN
Address: 37837 MERIDIAN AVENUE
City-St-Zip: DADE CITY, FL 33525 US

Title: S/D

Name: THOPMSON, PATRICIA
Address: 5028 BURWELL ROAD
City-St-Zip: WEBSTER, FL 33597 US

Title: EXDR

Name: SAMPLE, HAROLD R Address: 34825 OBERRY ROAD City-St-Zip: DADE CITY, FL 33523

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: HAROLD R. SAMPLE D 02/24/2010