

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State
 05-04-2001 90015 047 ****61.25

0023905

DOCUMENT # N96000001007

1. Entity Name

THE AFFORDABLE HOME CENTER, INC.

Principal Place of Business

200 E. COMMERCIAL ST.
 SUITE 3
 SANFORD FL 32771

Mailing Address

200 E. COMMERCIAL ST.
 SUITE 3
 SANFORD FL 32771

2. Principal Place of Business

800 S French Ave

3. Mailing Address

800 S French Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sanford FL

City & State

Sanford FL

Zip

32771

Country

USA

Zip

32771

Country

USA

4. FEI Number

59-3381225

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILLMAN, MARY L
 200 E. COMMERCIAL ST.
 SUITE 3
 SANFORD FL 32771

7. Name and Address of New Registered Agent

Name ALFREDA NATHAN

Street Address (P.O. Box Number is Not Acceptable)
 800 S French Ave

City Sanford

FL

Zip Code 32771

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.

SIGNATURE

Alfreda Nathan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE ED
 NAME HILLMAN, MARY L
 STREET ADDRESS 200 E. COMMERCIAL ST. #3
 CITY-ST-ZIP SANFORD FL 32771 ☒ Delete

TITLE D
 NAME BLANKENSHIP, RETHA
 STREET ADDRESS 110 E. FIRST ST
 CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

TITLE P
 NAME DIETRICH, DORIS M
 STREET ADDRESS 204 TANGERINE DR.
 CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

TITLE STD
 NAME JORDAN, GERI
 STREET ADDRESS 820 W. LAKE MARY BLVD
 CITY-ST-ZIP SANFORD FL 32773 ☐ Delete

TITLE D
 NAME BLAIR, LAURIE
 STREET ADDRESS 2422 MARSHALL AVE
 CITY-ST-ZIP SANFORD FL 32771 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ED
 NAME ALFREDA NATHAN
 STREET ADDRESS 800 S French Ave
 CITY-ST-ZIP SANFORD, FL 32771 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Alfreda Nathan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)