FILE NOW: FILING FEE IS $61.25 AMENDED

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 OCT -1 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N97000005029

1. Corporation Name

NATIONAL AFFORDABLE HOUSING FOUNDATION Inc.

Principal Place of Business	Mailing Address
8410 NE 1 PLACE MIAMI, FLORIDA	18910 NE 20 AVENUE MIAMI, FLORIDA 33179

2. Principal Place of Business — 21 (Street) / 22 Suite, Apt #, etc. / 23 City & State / 24 Zip / 25 Country

2a. Mailing Address — 26 (Street) / 27 Suite, Apt #, etc. / 28 City & State / 29 Zip / 30 Country

3. Date Incorporated or Qualified: 9/29/99

4. FEI Number: 65-0779481 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☒ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

STEWART MCLEOD
1799 NE 164 ST
N.M.B., FL 33160

10. Name and Address of New Registered Agent

81 Name: LEKAN QUADRI
82 Street Address (P.O. Box Number is Not Acceptable): ~~20530 NE 15 CT~~
83
84 City: MIAMI FL 85 Zip Code: 33168

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 [signature] — Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — 9/29/99 DATE

12 OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP					
PD	MILLIE HARPER 1401 NE 155 TERRACE N. MIAMI, FL 33168	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD	REV RICHARD BENNETT 6801 NW 15 AVE MIAMI, FL 33147 ☐ Change ☐ Addition
SD	BARBARA KIDWELL 8410 NE 1 PLACE MIAMI, FLORIDA 33138	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VPD	PASTOR MELVIN GRACE 1970 NW 171 ST MIAMI, FL 33056 ☐ Change ☐ Addition
D	REV RICHARD BENNETT 6801 NW 15 AVE MIAMI, FL 33147	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D	EMANUEL O'BIESIE 2530 NW 131 ST MIAMI, FL 33167 ☐ Change ☐ Addition
D	DR. EMANUEL O'BIESIE 1799 NE 164 ST MIAMI, FL 33160	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	S	BARBARA KIDWELL (Delete) 8410 NE 1 PLACE MIAMI, FL 33138 ☐ Change ☐ Addition
	000003006360--6 -10/05/99--01105--005 *****70.00 *****70.00 Changes made per phone conversation	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	SD	Bell Marie 2 NE 40th St #404 Miami, Fl 33137 ☐ Change ☐ Addition
	with Joseph Fucheck 10-1-99. [initials] 10/1/99	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	E	Fucheck, Joseph 8410 NE 1st Pl Miami, Fl 33138 ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: [signature] RICHARD BENNETT — 9/29/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)