

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006412

FILED
Mar 24, 2006
Secretary of State

Entity Name: BROWARD AFFORDABLE HOUSING TASK FORCE INC.

Current Principal Place of Business:

PO BOX 1524
FORT LAUDERDALE, FL 33302 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 12524
FORT LAUDERDALE, FL 33302 US

New Mailing Address:

FEI Number: 65-0614778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, CHESTER
4801 SOUTH UNIVERSITY #2500
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

BISHOP, CHESTER
2400 NORTH UNIVERSITY
SUITE 200
PEMBROKE PINES, FL 33024 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.

SIGNATURE:

03/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, CAROL
Address: 100 NORTH ANDREWS
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: TD () Delete
Name: SPELLACY, KIMBERLY
Address: ONE FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33432

Title: VD () Delete
Name: KIRTON-SMITH, BEVERLY
Address: 777 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: HOFFMEYER, LISA
Address: 305 SE 18TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FAUSEL, KRISTINA
Address: 2500 HOLLYWOOD BLVD, #314
City-St-Zip: HOLLYWOOD, FL 33020

Title: TD (X) Change () Addition
Name: JOHNSON, FRANCINE
Address: 4360 WEST OAKLAND PARK BLVD
City-St-Zip: FORT LAUDERDALE, FL 33313

Title: VD (X) Change () Addition
Name: BLANCO-TRUE, ERBI
Address: 1500 SAN REMO
City-St-Zip: CORAL GABLES, FL 33146

Title: SD (X) Change () Addition
Name: GALLOWAY, ANGELA
Address: PO BOX 1524
City-St-Zip: FORT LAUDERDALE, FL 33302

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KRISTINA FAUSEL

PD

03/24/2006

Electronic Signature of Signing Officer or Director

Date