2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003243

FILED Mar 06, 2012 Secretary of State

Entity Name: COALITION OF AFFORDABLE HOUSING PROVIDERS, INC.

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

335 BEARD ST

TALLAHASSEE, FL 32303 US

Current Mailing Address: New Mailing Address:

PO BOX 14629

TALLAHASSEE, FL 32317

FEI Number: 59-3518972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SKROB, ROBERT 335 BEARD ST

TALLAHASSEE, FL 32303 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: C

Name: DEUTCH, DAVID

Address: 9400 S. DADELAND BLVD, STE 100

City-St-Zip: MIAMI, FL 33156

Title: VC

Name: KISS, JEFF

Address: 1381 SAWGRASS COURT City-St-Zip: WINTER PARK, FL 32792

Title:

Name: THOMAS, CHRIS

Address: 100 CONGRESS AVE., STE 480

City-St-Zip: AUSTIN, TX 78701

Title: 5

Name: TOFT, HEATHER

Address: 390 NORTH ORANGE AVE., STE. 1100

City-St-Zip: ORLANDO, FL 32801

Title:

 Name:
 FEINBERG, HELEN

 Address:
 100 2ND AVE., S STE. 800

 City-St-Zip:
 ST. PETERSBURG, FL 33701

Title:

Name: FABBRI, TODD

Address: 580 VILLAGE BLVD., STE. 360 City-St-Zip: WEST PALM BEACH, FL 33409

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: DAVID DEUTCH C 03/06/2012