

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005954

FILED
Apr 26, 2005
Secretary of State

Entity Name: HOUSING OPPORTUNITIES, MORTGAGE ASSISTANCE, & EFFECTIVE NEIGHBORHOOD SOLUTIONS, INC.

Current Principal Place of Business:

3471 N. FED. HWY
SUITE #611
FORT LAUDERDALE, FL 33306

New Principal Place of Business:

Current Mailing Address:

3471 N. FED. HWY
SUITE #611
FORT LAUDERDALE, FL 33306

New Mailing Address:

FEI Number: 65-0870180

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLOMON, HARRIS K ESQ.
BRINKLEY, MCNERNEY, MORGAN, ET. AL.
200 EAST LAS OLAS BOULEVARD #1800
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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: DPCE () Delete
Name: BARRY, KATHARINE S
Address: 2665 N.E. 26TH TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33306

Title: DBC () Delete
Name: KURTH, LYDIA
Address: 10884 NW 2ND ST.
City-St-Zip: PLANTATION, FL 33324

Title: VC () Delete
Name: ROTELLA, GARY
Address: 200 E LAS OLAS BLVD, #1800
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DBT () Delete
Name: SOLOMON, HARRIS K
Address: 200 E LAS OLAS BLVD, #1900
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: STALLWORTH, TONY
Address: 225 E LAS OLAS BLVD 3RD FLOOR
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: DVC () Delete
Name: WERNER, DEBRA
Address: 2037 SE 17TH COURT
City-St-Zip: LAUDEDALE BY THE SEA, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHARINE S. BARRY

DPCE

04/26/2005

Electronic Signature of Signing Officer or Director

Date