

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000505

FILED
Feb 09, 2009
Secretary of State

Entity Name: MIAMI-DADE AFFORDABLE HOUSING FOUNDATION, INC.

Current Principal Place of Business:

BISCAYNE BUILDING
19 WEST FLAGLER STREET,STE.311
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

BISCAYNE BUILDING
19 WEST FLAGLER STREET,STE.311
MIAMI, FL 33130

New Mailing Address:

FEI Number: 65-0898790 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAYNON, PATRICIA
7300 NW 19 STREET
SUITE 501
MIAMI, FL 331261720 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: CD () Delete
Name: WALLACE, MILTON
Address: 25 WEST FLAGLER STREET, SUITE 750
City-St-Zip: MIAMI, FL 33130

Title: STD () Delete
Name: GULLEY, CHEREE
Address: 25 WEST FLAGLER STREET, SUITE 750
City-St-Zip: MIAMI, FL 33130

Title: VCD () Delete
Name: INGRAM, CORDELLA
Address: 25 WEST FLAGLER STREET, SUITE 750
City-St-Zip: MIAMI, FL 33130

Title: P () Delete
Name: BRAYNON, PATRICIA
Address: 25 WEST FLAGLER STREET, SUITE 750
City-St-Zip: MIAMI, FL 33130

Title: VCD (X) Delete
Name: FINE, MARTIN
Address: 25 WEST FLAGLER STREET, SUITE 750
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: WALLACE, MILTON
Address: 19 WEST FLAGLER STREET, SUITE 311
City-St-Zip: MIAMI, FL 33130

Title: STD (X) Change () Addition
Name: GULLEY, CHEREE
Address: 19 WEST FLAGLER STREET, SUITE 311
City-St-Zip: MIAMI, FL 33130

Title: VCD (X) Change () Addition
Name: HORN, DON
Address: 19 WEST FLAGLER STREET, SUITE 311
City-St-Zip: MIAMI, FL 33130

Title: P (X) Change () Addition
Name: BRAYNON, PATRICIA
Address: 19 WEST FLAGLER STREET, SUITE 311
City-St-Zip: MIAMI, FL 33130

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

I hereby certify that the information supplied with this filing does not qualify 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: PATRICIA BRAYNON

P

02/09/2009

Electronic Signature of Signing Officer or Director

_____ Date