

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 20, 2001 8:00 am**  
**Secretary of State**

03-06-2001 90349 024 \*\*\*\*70.50

**DOCUMENT # N99000002466**

1. Entity Name

**DEERFIELD BEACH AFFORDABLE HOUSING CORPORATION**

Principal Place of Business

533 S DIXIE HWY  
 DEERFIELD BEACH FL

Mailing Address

533 S DIXIE HWY  
 DEERFIELD BEACH FL

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **31-1722913**  
**APPLIED FOR**

Applied For  
 Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVIS, PAMELA  
 533 S DIXIE HWY  
 DEERFIELD BEACH FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

*Pamela E. Davis*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

*1/22/01*  
 DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
 NAME **GONOT, STEPHEN**  
 STREET ADDRESS **3944 NW 2D CT**  
 CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **D** ☐ Delete  
 NAME **EMERY, KEITH, Chairman**  
 STREET ADDRESS **10 FAIRWAY DR #301**  
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE **D** ☐ Delete  
 NAME **FINKELSTEIN, JAY**  
 STREET ADDRESS **425 NW 1ST TERR #422**  
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

TITLE **D** ☒ Delete  
 NAME **PHILLIPS, GREG W**  
 STREET ADDRESS **5308 GARFIELD RD**  
 CITY-ST-ZIP **DELRAY BEACH FL 33481**

TITLE **D** ☐ Delete  
 NAME **WILKIE, POLLY**  
 STREET ADDRESS **11131 TAFT ST**  
 CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **D** ☒ Delete  
 NAME **CANFIELD, STEVE**  
 STREET ADDRESS **BROWARD SHERIFFS OFFICE 300 NE 2D ST**  
 CITY-ST-ZIP **DEERFIELD BEACH FL 33441**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
 NAME **Gallo, William, Vice Chairman**  
 STREET ADDRESS **1311 Newport Center Drive West**  
 CITY-ST-ZIP **Deerfield Beach, Fla. 33442**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Pamela E. Davis* **2/26/01** **(954) 425-8449**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)