

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

03-06-2003 90332 001 *****8.75
03-06-2003 90332 002 *****61.25

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**

00010670

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

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DAVIS, PAMELA
533 S DIXIE HWY
DEERFIELD BEACH FL**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Pamela J Davis
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-4-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

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

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

TITLE **D**
NAME **WILKIE, POLLY**
STREET ADDRESS **11131 TAFT ST**
CITY-ST-ZIP **PEMBROKE PINES FL 33028**

TITLE **VC**
NAME **GALLO, WILLIAM**
STREET ADDRESS **1311 NEWPORT CTR, DRIVE W**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **Commissioner**
NAME **SANDRA MCGINNIS**
STREET ADDRESS **1104 SE 10th Terrace**
CITY-ST-ZIP **Deerfield Bch FL 33441**

TITLE **Commissioner**
NAME **RICHARD SALES**
STREET ADDRESS **1664 S. Federal Hwy**
CITY-ST-ZIP **Deerfield Bch FL 33441**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **ART KAMM Commissioner**
NAME **1570 SE 8th St.**
STREET ADDRESS **Deerfield Bch, FL 33441**

TITLE **Lee Granino, Commissioner**
NAME **201 N. Federal Hwy Suite 104**
STREET ADDRESS **Deerfield Bch, FL 33441**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
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: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-03

Date

Daytime Phone #

954-425-8449

CR2037 (10/02)