## 2008 NOT-FQR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Mar 06, 2008 08:00 Al Secretary of State

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1. Entity Name

TCB FLORIDA AFFORDABLE HOUSING, INC.



Principal Place of Business

C/O THE COMMUNITY BUILDERS, INC. 95 BERKELEY ST, SUITE 500 BOSTON, MA 02116 US

Mailing Address

C/O THE COMMUNITY BUILDERS, INC. 95 BERKELEY ST, SUITE 500 BOSTON, MA 02116



02122008 No Chg-NP

CR2E037 (4/06)

Fee Required

	Additional
58-2492541	Not Applicable
4. FEI Number	Applied For

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD

## DO NOT WRITE

PLANTATION, FL 33324			IN THIS SPACE			
	named entity submits this statement for the ions of registered agent.	purpose of changing its registere	ed office or registered agent, or bot	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable (NOTE: Registere	d Agent signature required when reinstating)	DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Finan     Trust Fund Contribution.	scing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRE	CTORS	3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
NAME STREET ADDRESS CITY-ST-ZIP	DT CLANCY, PATRICK E 2 POJAC ROAD POINT NORTH KINGSTOWN, RI 02852		ang ing trade si proper si sami di sam Sami di sami di			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AC RUSHFORD, JAMES 35 FAY ST BOSTON, MA 02118			in the second training to the second of the		
TITLE NAME STREET ADDRESS CHY-ST-ZIP	DC KEYES, LANGLEY 103 MASSACHUSETTS AVE CAMBRIDGE, MA 02139			NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MERCHANT, EDWARD H 9 RAWSON ROAD BROOKLINE, MA 02445		ser in a ser of <b>N</b> ed e ser in a ser of ser	THIS SPACE		
NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			A Same of the Same	Andrew Committee of the second		
12. I hereby of indicated	certify that the information supplied with this on this report or supplemental report is true	filing does not qualify for the exe and accurate and that my signat	emptions contained in Chapter 119 ure shall have the same legal effec	I, Florida Statutes. I further certify that the information tas 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 changed, or on an attachment with an address, with all other like empowered.