2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P92000002819

Entity Name: HERITAGE AFFORDABLE HOUSING, INC.

FILED Sep 09, 2003 Secretary of State

Current P	rincipal Place of	Business:	New Princ	New Principal Place of Business:		
55054 N ATLANTIC AVE			5505 N ATLANTIC AVE			
115 COCOA BEACH, FL 32931 US			115 COCOA BEACH, FL 32931 US			
Current Mailing Address:			New Mailing Address:			
	TLANTIC AVE					
115 COCOA BI	EACH, FL 32931	US				
FEI Number:	59-3148897	FEI Number Applied For()	FEI Number Not Appli	cable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
5505 N AT COCOA BI	PS, JACQUELINE LANTIC AVE #11 EACH, FL 32931	5 US				
The above in the State		omits this statement for the p	urpose of changing it	s registered off	ice or registered agent, or both,	
SIGNATUR	RE:					
	Electronic	Signature of Registered Age	ent		Date	
	npaign Financing Tr S AND DIRECTO	rust Fund Contribution ().	ADDITION	SICHANGES T	O OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	DP () De MCPHILLIPS, MICI 5505 N ATLANTIC COCOA BEACH, F	elete HAEL AVE #115	Title: Name: Address: City-St-Zip:		Change () Addition	
Title: Name: Address: City-St-Zip:	DVTS () De MCPHILLIPS, JAC 5505 N ATLANTIC COCOA BEACH, F	QUELINE AVE #115	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	V () De COLVARD, ALISON 25505 N ATLANTIC COCOA BEACH, F	N CAVE #115	Title: Name: Address: City-St-Zip:	DV (X)	C AVE #115	
Title: Name: Address: City-St-Zip:	DC () De HARDING, NEAL 5505 N ATLANTIC COCOA BEACH, F	AVE 115	Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address:	DV (X) DO KINCAID, JAMES 5505 N ATLANTIC		Title: Name: Address:	() (Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MICHAEL MCPHILLIPS V 09/09/2003

City-St-Zip: COCOA BEACH, FL 32931