Mailing Address 1460 BRICKELL AVENUE

SUITE 309

MIAMI FL 33131

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90157 001 *3,226.25

DO NOT WRITE IN THIS SPACE

FILED

DOCUMENT # P9300032820

1. Corporation Name

Principal Place of Business

1460 BRICKELL AVENUE

SUITE 309

MIAMI FL 33131

GMN AFFORDABLE HOUSING PARTNER VIII, INC.

22. Malling Address 22. Malling Address 23. Malling Address 24. Malling Address 25. Malling Address 26. Mil 1018 Not Applicable						3. Date incorporated or Qualified 05/05/1993		
Surile, Apt. #, etc. Surile, Apt. #, etc. Surile Surile, Apt. #, etc. Surile, Apt.	2 Principal Pl	ace of Business	2a. Mailing Address		_		T A	pplied For
Sulle, Apt. #, etc. Sulle, Apt. #, etc.	21	200 21 20011000				65-0413018	N	ot Applicable
City & State Reference on the city of t	Suite, Apt. #, etc. Suite, Apt. #, etc.					ν.	Satisfacts of Status Pasiend	
Zip Country Zip Country	City & State City & State					, - II		
9. Name and Address of Current Registered Agent GREATER MIAMI NEIGHBORHOODS, INC. 1460 BRICKELL AVE., # 309 MIAMI FL 33131 44 City FL 85 Zip Code 45 City FL 85 Zip Code 46 City FL 85 Zip Code 46 City FL 85 Zip Code 47 City FL 85 Zip Code 48 City FL 85 Zip Code FL 85 Zi		Country Zip			у			□No
GREATER MAMI NEIGHBORHOODS, INC. 1460 BRICKELL AVE., \$ 309 MIAMI FL 33131 15						10. Name and Address of New Registered A	gent	
MIAMI FL 33131 B3	GREATER MIAMI NEIGHBORHOODS, INC.					Idress (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, it am familiar with, and accept the chilipations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. TITLE VD DELETE 11. TITLE VD DELETE 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME SIBLEY, RUSSELL A 14.60 BRICKELL AVE., SUITE 309 MAMI FL 33131 COLETE 21. TITLE VD WOLFSON, LOUIS III 8940 NE 24TH TERRACE 23. STREET ADDRESS GIV'-ST-2P MAMI FL 33172 VD ANDERSON EUGENIA J. 1460 BRICKELL AVE., # 309 MIAMI FL 33131 1460 BRICKELL AVE., # 309 MIAMI FL 33131 17. DELETE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STREET ADDRESS 14. GIV'-ST-2P MIAMI FL 33131 14. GIV'-ST-2P 17. DELETE 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STREET ADDRESS 14. GIV'-ST-2P 15. TITLE 15. TITLE 16. Change Addition 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STREET ADDRESS 14. GIV'-ST-2P 15. TITLE 16. Change Addition 16. Change Addition 17. Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS				83				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was without agent. I am remiliar with, and accept the objections 607.0505, Florida Statutes. SIGNATURE SIGNATURE SUBJUANT Registered Agent signature required when reinstating) ADTE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE VD SIBLEY, RUSSELL A 1460 BRICKELL AVE., SUITE 309 MIAMI FL 33131 D VOLFSON, LOUIS III STREET ADDRESS OUTY-ST-2P VD ANDERSON EUGENIA J. 33 STREET ADDRESS OUTY-ST-2P MIAMI FL 33131 D DELETE 41 TITLE D Change Addition ANDERSON EUGENIA J. 33 STREET ADDRESS OUTY-ST-2P MIAMI FL 33131 D DELETE 41 TITLE D Change Addition ANDERSON EUGENIA J. 33 STREET ADDRESS OUTY-ST-2P MIAMI FL 33131 D DELETE 41 TITLE D Change Addition ANDERSON EUGENIA J. 33 STREET ADDRESS OUTY-ST-2P MIAMI FL 33131 D DELETE 41 TITLE D Change Addition ANDERSON EUGENIA J. 33 STREET ADDRESS OUTY-ST-2P MIAMI FL 33131 D DELETE 41 TITLE D Change Addition ADDITIONS/CHANGES AND DIRECTORS IN 12 Change Addition ADDITIONS/CHANGES AND DIRECTORS IN 12 ADDITIONS/CHANGES ADDITIONS AND DIRECTORS IN 12 ADDITIONS/CHANGES AND DIRECTORS IN 12 ADDIT	77417 444	/ 5 33/3/					85 Zip	Code
Signature, Upped or printed name of registered agent signature required when reinstating) DATE	office or re agent. I ar	egistered agent, or both, in the State o	of Florida. Such change was auth	norized by	/ the corpora	progration submits this statement for the purpose of o	changing its tment as re	s registered egistered
DELETE 1.1 TITLE Change Addition	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Age	ent signature requ	uired when reinstating) DATE		
SIBLEY, RUSSELL A 12 NAME 13 STREET ADDRESS 1460 BRICKELL AVE., SUITE 309 13 STREET ADDRESS 1460 BRICKELL AVE., SUITE 309 14 CITY-ST-ZIP Change Addition AMME NAME ANDERSON, LOUIS III 22 NAME 22 NAME 23 STREET ADDRESS AMMIN FL 33 172 Change Addition AMME ANDERSON EUGENIA J. 32 NAME 33 STREET ADDRESS AMMIN FL 33 131 Change Addition AMME ANDERSON EUGENIA J. 33 STREET ADDRESS AMMIN FL 33 131 Change Addition ANDERSON EUGENIA J. ANDERSON EUGENIA J. 33 STREET ADDRESS AMMIN FL 33 131 Change Addition ANDERSON EUGENIA J.	12.	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	
1460 BRICKELL AVE.,SUITE 309 1.3 STREET ADDRESS 1.4 GITY-ST-ZIP MIAMI FL 33131	TITLE	VD	☐ DELETE	1.1 TITLE			Change	☐ Addition
13 STREET ADDRESS	NAME	SIBLEY, RUSSELL A		1.2 NAME				
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TITLE	CITY-ST-ZIP		. .	1.4 CITY-	ST-ZIP			
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MIAMI FL 33172	STREET ADDRESS			2.3 STREE	T ADDRESS			
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NAME SARIOL, MARIO A 6.2 NAME			DÈLETE	6.1 TITLE			Change	Addition
	i		• •	6.2 NAME		•		
	STREET ADDRESS			6.3 STREE	ET ADDRESS			,

14. 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 annual report or suppliemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 or on an attachment with an appears, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

MIAMI FL 33131