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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000061220 (5) DOCUMENT #

NHP AHP AFFORDABLE HOUSING CORPORATION, IN2.

Principal Place of Business Mailing Address 1675 PALM BEACH LAKES BLVD. STE 1002 1675 PALM BEACH LAKES BLVD. STE 1002 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401

FILED Mar 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/23/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0704727 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ERBEY, JOHN R 1675 PALM BEACH LAKES BLVD. STE 1002 82 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33401** 83 84 City Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE Change Addition ERBEY, WILLIAM C NAME 1.2 NAME 1675 PALM BEACH LAKES BLVD. STE 1002 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE Change WISH, BARRY N NAME 2.2 NAME 1675 PALM BEACH LAKES BLVD. STE 1002 STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE DAVIDSON, ROBERT C NAME 3.2 NAME 1675 PALM BEACH LAKES BLVD STE 1002 STREET ADDRESS 3 3 STREET ADDRESS W PALM BEACH FL CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Additio NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

14. Thereby certify that the information supposed 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 surprimental 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 of the recover or I professional 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 of the recover or I professional true and accurate and that my name appears in Block 12 or Block 13 if changed or on an area of the professional true and the professional true and that my name appears in Block 12 or Block 13 if changed or on an area of the professional true and accurate and that my name appears in Block 12 or Block 13 if changed or on an area of the professional 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 of the professional 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 of the professional true and accurate and the professional true and accurate and the professional true and accurate and the professional true and true and

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

ASSY, SECY

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