

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P99000066316

1. Entity Name

ACELAND HOUSING ENTERPRISES, INC.



FILED

04 MAY -6 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1977 DUNDEE DRIVE
WINTER PARK FL 32792
US

Mailing Address

1977 DUNDEE DRIVE
WINTER PARK FL 32792
US

2. Principal Place of Business

2431 Aloma Avenue

Suite, Apt. #, etc.

Ste 215

City & State

Winter Park

Zip

FL

Country
USA

3. Mailing Address

2431 Aloma Avenue

Suite, Apt. #, etc.

Ste 215

City & State

Winter Park

Zip

FL

Country
USA



04/26/04-91039-050 \$150.00

4. FEI Number

59-3592067

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

A & S DEVELOPMENT INC
1977 DUNDEE DRIVE
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name

A & S Affordable Management, Inc.

Street Address (P.O. Box Number is Not Acceptable)

2431 Aloma Avenue

Ste 215

City

Winter Park

FL

Zip Code

32792

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

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

(NOTE: Registered Agent signature required when registering)

DATE

Thomas Shepherd VP 4/22/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees.

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME ACEVEDO, SHANE L
STREET ADDRESS 1977 DUNDEE DRIVE
CITY-ST-ZIP WINTER PARK FL 32792

TITLE D ☐ Delete
NAME SHEPHERD, THOMAS
STREET ADDRESS 1977 DUNDEE DRIVE
CITY-ST-ZIP WINTER PARK FL 32792

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2431 Aloma Avenue Ste 215
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2431 Aloma Avenue, Ste 215
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 607, 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:

Thomas Shepherd

4/22/04

Date

407 657-1113

Daytime Phone #