PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

(1)

CED AFFORDABLE HOUSING DEVELOPMENT, INC.								
Principal Place of	Business	Mailing Address			1 (031/4/6 19) (0/0/ 48/// 4/9/0 3/			
% B&C CORPORATE SERVICES OF CENTRAL FL 390 NORTH ORANGE AVENUE. SUITE 1100 ORLANDO FL 32801		390 NORTH ORANK	% B&C CORPORATE SERVICES OF CENTRAL FL 390 NORTH ORANGE AVENUE. SUITE 1100 ORLANDO FL 32801		Date Incorporated or Qualified	3a, Date of	Last R	eport
****					10/18/1991	03	/13/1	
2. Frincipal Place	e of Business	2a. Mailing Address			4, FEI Number		\vdash	Applied For Not Applicable
21		26 Suite. Apt. #, etc.		59-3099460			Additional	
Suite, Apt. #, (etc.			5. Certificate of Status Desired		Fee Required		
City & State		City & State			6. Election Campaign Financing			May Be
23		28			Trust Fund Contribution			d to Fees
Zip	Country	Ζφ	Count	ry	8. This corporation has liability for	intang⊪ble tax u ∷ ∐No	under s	199.032,
4]	25	29	30		Florida Statutes Yes 10. Name and Address of New F		ent	
	9. Name and Address of Currer	t Registered Agent		1 Name	10. Name and Address of Non-	109101010		
		HEAL PLANISA				1.3		
	B&C CORPORATE SERVICES OF CENTRAL FLORIDA 390 NORTH ORANGE AVENUE			Street Addre	ess (P.O. Box Number is Not Acceptal			
SUITE 1			8	13				
	O FL 32801			34 City			85 Z	ip Code
			1.5	1 ' '	ation submits this statement for the pud of directors. I hereby accept the app	FL	بلب	
SIGNATURE s	gravine, typica or printers number of registered agent OFFICERS AN	ID DIRECTORS	NOTE: Registered A	gert signature require:	3 when reinstating) ADDITIONS/CHANGES TO OF			
11/16	VDT	DELFTE	1.17()	LE		L	Change	☐ Addition
NAME	GINSBURG, ALAN H.		1.2 NA	ME				
STREET ADDRESS	2200 LUCIEN WAY, STE 4	50		IEET ADDRESS				
COLY - \$1 - 70P	MAITLAND FL			Y-ST-ZiP			Change	Addition
tillF	DV	☐ DELETE	2 1 111				•	
NAME	KANTOR, STEVEN M	50	2.2 NAI	NEET ADDRESS				
STREET ADORESS	2200 LUCIEN WAY, STE 4 MAITLAND FL	30	t t	Y-ST-ZIP		_		
THE	MAJILANU FL	T DELETE	3 1 717				Change	Addition
NAME			3.2 NA	ME				
STREET ADDRESS			33 SI	REET ADDRESS				
CHY S1-7/P			3.4 CI	ry-ST-ZIP			Chana	e 🔲 Addition
Tillf		☐ DEFEIF	4. 1 TI	TLE		L] Change	z [] Abolion
NAMÉ			4 2 NA					
SERSEL ADDRESS				HEFT ADDRESS				
C/1Y - ST - Z/P		PH Dr. Fre		TY-ST-ZIP			Change	e
TIFLE		DELETE	5 1 10	i		L.	. •	_
NAME			5 2 N/	REET ADDRESS				
STREET ADDRESS				TY-ST-ZIP				
C 1Y - S1 - Z P		☐ DELETE	6 1 7			يا بدريم مي	Chang	e 🔲 Addition
TRUE				AME *	3000017	465]	ມິລ	
NAME				TREET ADDRESS	00/10/00	101702	:U	
STREET ADORESS		/		11Y - ST - 21P	***200.00			

is filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further part or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name attachment with an address. 14. I do hereby certify that the information supplied with certify that the information indicated on this annual of oath; that I am an officer or director of the corporal appears in Block 12 or Block 13 if changed, or on

6 4 CITY - ST- 2IP

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OF LIRECTOR

2/1/96

407/660-1110

Deytme Phone ≢

