

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S88468 (1)  
1. Corporation Name  
CED AFFORDABLE HOUSING DEVELOPMENT, INC.

FILED

98 APR 30 PM 2:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

3200 LUCIEN WAY, STE 450  
MAITLAND FL 32751

P O BOX 4961  
ORLANDO FL 32802-4961

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/18/1991

4. FEI Number

59-3099460

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1551 Sandspur Rd

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Maitland, FL

29 City & State

25 Zip

30 Zip

26 Country

31 Country

27 Country

32 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA  
390 NORTH ORANGE AVENUE  
SUITE 1100  
ORLANDO FL 32801

81 Name

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

83 700002511477-1

84 -05/05/98-01113-003

85 \*\*\*\*150.00

86 \*\*\*\*150.00

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 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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DPST ☐ DELETE

NAME GINSBURG, ALAN H.  
STREET ADDRESS 2200 LUCIEN WAY, STE 450  
CITY-ST-ZIP MAITLAND FL

1.1 TITLE D/P/S/T ☒ Change ☐ Addition

1.2 NAME Alan H. Ginsburg  
1.3 STREET ADDRESS 1551 Sandspur Rd.  
1.4 CITY-ST-ZIP Maitland, FL 32751

TITLE DV ☐ DELETE

NAME KANTOR, STEVEN M  
STREET ADDRESS 2200 LUCIEN WAY, STE 450  
CITY-ST-ZIP MAITLAND FL

2.1 TITLE D/VP ☒ Change ☐ Addition

2.2 NAME Steven M. Kantor  
2.3 STREET ADDRESS 1551 Sandspur Rd.  
2.4 CITY-ST-ZIP Maitland, FL 32751

TITLE VP ☐ DELETE

NAME SCIARRINO, MICHAEL J  
STREET ADDRESS 2200 LUCIEN WAY, STE 450  
CITY-ST-ZIP MAITLAND FL 32751

3.1 TITLE VP ☒ Change ☐ Addition

3.2 NAME Michael J. Sciarrino  
3.3 STREET ADDRESS 1551 Sandspur Rd.  
3.4 CITY-ST-ZIP Maitland, FL 32751

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 supplemental 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 changed, or on an attachment to an address.

CR2E034 (10/97)