

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 767487

**FILED**  
**Feb 18, 2015**  
**Secretary of State**  
**CC0357872254**

**Entity Name:** HOUSING ENTERPRISES OF FORT LAUDERDALE, FLORIDA, INC.

**Current Principal Place of Business:**

437 SOUTHWEST FOURTH AVENUE  
FORT LAUDERDALE, FL 33315

**Current Mailing Address:**

437 SOUTHWEST FOURTH AVENUE  
FORT LAUDERDALE, FL 33315

**FEI Number: 59-2303299**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

ENGLISH, TAM A  
437 SOUTHWEST FOURTH AVENUE  
FORT LAUDERDALE, FL 33315 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name TRANAKAS, NICHOLAS MD  
Address 437 SOUTHWEST FOURTH AVENUE  
City-State-Zip: FT LAUDERDALE FL 33315

Title D  
Name HERNANDEZ, ANA  
Address 500 WEST SUNRISE BOULEVARD  
City-State-Zip: FORT LAUDERDALE FL 33311

Title D  
Name ENGLISH, TAM A  
Address 437 SOUTHWEST FOURTH AVENUE  
City-State-Zip: FORT LAUDERDALE FL 33315

Title D  
Name JACKSON, LIZ  
Address 3280 SPANISH MOSS TERR., #107  
City-State-Zip: LAUDERHILL FL 33319

Title D  
Name CURNIN, THOMAS  
Address 425 SW 4TH AVE #305  
City-State-Zip: FORT LAUDERDALE FL 33315

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: TAM A. ENGLISH**

**DIRECTOR**

**02/18/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date