

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 837387

1. Entity Name

NATIONAL CORPORATION FOR HOUSING PARTNERSHIPS

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90096 006 ***150.00

Principal Place of Business 1873 S. BELLAIRE ST SUITE 1700 DENVER CO 80222 US	Mailing Address 1873 S. BELLAIRE ST SUITE 1700 DENVER CO 80222-4380 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Ste. 2-1000 City & State Denver, CO Zip 80222 Country USA	3. Mailing Address 2000 South Colorado Blvd. Suite, Apt. #, etc. Tower Two, Suite 2-1000 City & State Denver, CO Zip 80222 Country USA
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4. FEI Number 52-0886787	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent UNITED STATES CORPORATION COMPANY 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE CEO NAME TERRY CONSIDINE STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input checked="" type="checkbox"/> Delete	TITLE President/Director NAME Patrick J. Foye STREET ADDRESS 2000 S. Colo. Blvd., Tower Two, #2-1000 CITY-ST-ZIP Denver, CO 80222	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME LEEANN MOREIN STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input checked="" type="checkbox"/> Delete	TITLE EVP/Secretary NAME Joel F. Bonder STREET ADDRESS 2000 S. Colo. Blvd., Tower Two, #2-1000 CITY-ST-ZIP Denver, CO 80222	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME THOMAS W TOOMEY STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input type="checkbox"/> Delete	TITLE Director NAME Patricia K. Heath STREET ADDRESS 2000 S. Colo. Blvd., Tower Two, #2-1000 CITY-ST-ZIP Denver, CO 80222	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME STEVEN D IRA STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input checked="" type="checkbox"/> Delete	TITLE VP and Treasurer NAME Patricia K. Heath STREET ADDRESS 2000 S. Colo. Blvd., Tower Two, #2-1000 CITY-ST-ZIP Denver, CO 80222	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME TROY D BUTTS STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input checked="" type="checkbox"/> Delete	TITLE EVP NAME Joel F. Bonder STREET ADDRESS 2000 S. Colo. Blvd., tower Two, #2-1000 CITY-ST-ZIP Denver, CO 80222	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME HARRY G ALCOCK STREET ADDRESS 1873 SOUTH BELLAIRE ST., 17TH FLOOR CITY-ST-ZIP DENVER CO 80222	<input type="checkbox"/> Delete		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joel Bonder Joel Bonder, EVP/Secretary 4-20-00 (303) 757-8101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #