2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

02 MAR 28 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

001826 AT

DOCUMENT # A14902

1. Entity Name

HICKORY RIDGE ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
TOWER TWO 2000 SOUTH COLORADO BLVD., SUITE 2-1000 DENVER CO 80222	TOWER TWO 2000 SOUTH COLORADO BLVD., SUITE 2-1000 DENVER CO 80222

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DUE BY MAY 1, 2002

4. FEI Number 52-1317201 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS ST.
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

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.

9. Capital Contributions as Shown on record. $290.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	A06999	STREET ADDRESS	
NAME	THE NATIONAL HOUSING PARTNERSHIP, LTD.		
STREET ADDRESS	2000 SOUTH COLORADO BLVD., SUITE 2-1000	CITY-ST-ZIP	
CITY-ST-ZIP	DENVER CO 80222		
DOCUMENT # / NAME / STREET ADDRESS / CITY-ST-ZIP		STREET ADDRESS	200005190242 5
		CITY-ST-ZIP	-04/03/02--01064--029 ****141.25 ****141.25
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		CITY-ST-ZIP	

CR2E003 (9/01)

STAPLE CHECK HERE

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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

Hickory Ridge Associates, Ltd, by its GP, The National Housing Partnership, Ltd, by its GP, National Corporation for Housing Partnerships

SIGNATURE: By: Chad Asarch, Asst. Secretary 3-20-02 303-757-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #