

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006713

FILED
Feb 08, 2012
Secretary of State

Entity Name: RHA/HOUSING, INC.

Current Principal Place of Business:

ONE BUCKHEAD PLAZA, SUITE 900
3060 PEACHTREE RD, NW
ATLANTA, GA 30305

New Principal Place of Business:

Current Mailing Address:

ONE BUCKHEAD PLAZA, SUITE 900
3060 PEACHTREE RD, NW
ATLANTA, GA 30305

New Mailing Address:

FEI Number: 58-2131548

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CEO
Name: COATS, BRYANT G
Address: 3060 PEACHTREE ROAD, NW, SUITE 900
City-St-Zip: ATLANTA, GA 30305

Title: D
Name: BRADEEN, CHET
Address: 1170 BAWDEN CIRCLE
City-St-Zip: BROOKFIELD, WI 53045

Title: D
Name: COATS, ROBERT B JR
Address: 330 DAWN BROOK DRIVE
City-St-Zip: FLAT ROCK, NC 28731

Title: SD
Name: NORTHCUTT, CHARLES W III
Address: 100 CAMILLA DRIVE
City-St-Zip: DOTHAN, AL 36303

Title: CFOV
Name: WEST, JOHN R
Address: 3060 PEACHTREE ROAD, NW, SUITE 900
City-St-Zip: ATLANTA, GA 30305

Title: P
Name: NORTHCUTT, CHASE
Address: 3060 PEACHTREE ROAD, SUITE 910
City-St-Zip: ATLANTA, GA 30305

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: JOHN R. WEST

CFO

02/08/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date