

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000027314

Entity Name: RAYMOND JAMES CALIFORNIA HOUSING OPPORTUNITIES
FUND VII L.L.C.**FILED**
Apr 16, 2021
Secretary of State
9291532176CC**Current Principal Place of Business:**880 CARILLON PARKWAY
DEPT. 05485
SAINT PETERSBURG, FL 33716**Current Mailing Address:**880 CARILLON PARKWAY
DEPT. 05485
SAINT PETERSBURG, FL 33716 US**FEI Number: 82-0719609****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RAYMOND JAMES TAX CREDIT FUNDS, INC.
880 CARILLON PARKWAY
DEPT. 05485
SAINT PETERSBURG, FL 33716 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

Authorized Person(s) Detail :

| | |
|-----------------|-------------------------------------|
| Title | ENTITY MANAGER |
| Name | YOUNG, LINDA |
| Address | 880 CARILLON PARKWAY DEPT. 05485 |
| City-State-Zip: | SAINT PETERSBURG FL 33716 |

| | |
|-----------------|-------------------------------------|
| Title | AUTHORIZED ASSOCIATE |
| Name | CARGO, RICHARD L. |
| Address | 880 CARILLON PARKWAY DEPT. 05485 |
| City-State-Zip: | SAINT PETERSBURG FL 33716 |

| | |
|-----------------|-------------------------------------|
| Title | MANAGER & MEMBER |
| Name | RJ CHOF VII L.L.C. |
| Address | 880 CARILLON PARKWAY DEPT. 05485 |
| City-State-Zip: | SAINT PETERSBURG FL 33716 |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA YOUNG**ENTITY MANAGER****04/16/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date