2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000289

Entity Name: NATIONAL CENTER FOR HOUSING MANAGEMENT, INC.

FILED Apr 04, 2017 **Secretary of State** CC8923350723

Current Principal Place of Business:

11350 RANDOM HILLS ROAD

SUITE 811

FAIRFAX, VA 22030

Current Mailing Address:

11350 RANDOM HILLS ROAD 811

FAIRFAX, VA 22030 US

FEI Number: 52-0955650 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

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

CCEO Title Title DS

BURKE, JR., JOHN J FOX. WILLIAM F Name Name

Address 622 N. WATER STREET Address 622 NORTH WATTER STREET SUITE #200

MILWAUKEE WI 53202 MILWAUKEE WI 53202 City-State-Zip: City-State-Zip:

Title PCO₀ Title

STEVENS, GLENN STEVENS, GLENN Name Name

11350 RANDOM HILLS ROAD 11350 RANDOM HILLS ROAD Address Address

SUITE #811

FAIRFAX VA 22030 City-State-Zip: FAIRFAX VA 22030 City-State-Zip:

Title Title DIRECTOR **DIRECTOR**

BURKE, KATHRYN BURKE, JOHN III Name Name

622 N. WATER STREET 622 N. WATER STREET Address Address

#200

City-State-Zip: MILWAUKEE WI 33202 City-State-Zip: MILWAUKEE WI 33202

Title **DIRECTOR**

SLOCUM, WENDY Name

Address 622 N. WATER STREET

SUITE #200

City-State-Zip: MILWAUKEE WI 33202

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.

04/04/2017 SIGNATURE: GLENN STEVENS **PRESIDEND**

Electronic Signature of Signing Officer/Director Detail

Date