2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2013
Secretary of State
CC9245820370

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Entity Name: RHA/HOUSING, INC.

Current Principal Place of Business:

ONE BUCKHEAD PLAZA, SUITE 900
3060 PEACHTREE RD, NW ATTN: PETER M. WRIGHT
ATLANTA, GA 30305

Current Mailing Address:

ONE BUCKHEAD PLAZA, SUITE 900
3060 PEACHTREE RD, NW ATTN: PETER M. WRIGHT
ATLANTA, GA 30305 US

FEI Number: 58-2131548

Certificate of Status Desired: No

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 :

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

Title	D
Name	COATS, ROBERT BJR
Address	330 DAWNBROOK DRIVE
City-State-Zip:	FLAT ROCK NC 28731

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

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

Title	SD
Name	NORTHCUTT, CHARLES WIII
Address	100 CAMILLA DRIVE
City-State-Zip:	DOTHAN AL 36303

Title	P
Name	NORTHCUTT, CHASE
Address	3060 PEACHTREE ROAD, SUITE 910
City-State-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 02/13/2013

Electronic Signature of Signing Officer/Director Detail — Date