

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 837387

**FILED**  
**Apr 16, 2013**  
**Secretary of State**  
**CC5942022415**

**Entity Name:** NATIONAL CORPORATION FOR HOUSING PARTNERSHIPS

**Current Principal Place of Business:**

4582 S ULSTER ST  
SUITE 1100  
DENVER, CO 80237

**Current Mailing Address:**

4582 S ULSTER ST  
SUITE 1100  
DENVER, CO 80237 US

**FEI Number:** 52-0886787

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION COMPANY  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE, FL 32301 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 P  
Name CONSIDINE, TERRY  
Address 4582 S ULSTER ST STE 1100  
City-State-Zip: DENVER CO 80237

Title AS  
Name EHRHARD, LUCINDA M  
Address 4582 S ULSTER ST STE 1100  
City-State-Zip: DENVER CO 80237

Title EVPS  
Name COHN, LISA R  
Address 4582 S ULSTER ST STE 1100  
City-State-Zip: DENVER CO 80237

Title EVPT  
Name FIELDING, PATTI K  
Address 4582 S ULSTER ST STE 1100  
City-State-Zip: DENVER CO 80237

Title CFOD  
Name FREEDMAN, ERNEST M  
Address 4582 S ULSTER ST STE 1100  
City-State-Zip: DENVER CO 80237

Title VP  
Name ORGAN, TONY  
Address 4582 S ULSTER ST SUITE 1100  
City-State-Zip: DENVER CO 80237

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUCINDA M EHRHARD

**ASSISTANT SECRETARY** 04/16/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date