

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 13 PM 3:26

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1. Name of Limited Partnership **1a. DOCUMENT #**
A95000001938

NHP AFFORDABLE HOUSING PARTNERS 3, LIMITED PARTNERSHIP

Mailing Address C/O OCWEN FINANCIAL CORP. 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH FL 33401	Principal Office Address C/O OCWEN FINANCIAL CORP. 1675 PALM BEACH LAKES BLVD., SUITE 1002 WEST PALM BEACH FL 33401
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered 12/12/1995	5a. Capital Contributions as Shown on record. \$100.00
3a. Date of Last Report 02/20/1996	5b. Amount of Capital Contributions in FLORIDA to date.
4. State or Country of Formation FL	
6. FEI Number APPLIED FOR 65-0632447	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301	10. If changed, new Registered Agent/Office Name JOHN R. ERBEY Street Address (P.O. Box Number Is Not Acceptable) 1675 PALM BEACH LAKES BLVD. Suite, Apt. #, etc. SUITE 1002 City WEST PALM BEACH FL Zip Code 33401
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *[Signature]*

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s) REBECCA FEDERAL BANK & TRUST NAME CHANGE: OCWEN FEDERAL BANK FSB	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1675 PALM BEACH LAKES BLVD.	11b. City, State & Zip Code WEST PALM BEACH FL 33401	11c. Registration/Document Number OCWEN FEDERAL BANK IS A FEDERALLY CHARTERED SAVINGS BANK INCORPORATED UNDER THE LAWS OF THE UNITED STATES OF AMERICA AND THEREFORE DOES NOT NEED TO BE REGISTERED AS A GENERAL PARTNER IN THE STATE OF FL
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *[Signature]* **STEPHEN C. WILHOIT, SR. VICE PRESIDENT** DATE **11-22-96**

Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CR2E003 (6/96)