

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004067

FILED  
Apr 29, 2011  
Secretary of State

**Entity Name:** AFFORDABLE HOUSING CENTERS OF AMERICA, INC.

**Current Principal Place of Business:**

209 W JACKSON  
STE 301  
CHICAGO, IL 60606

**New Principal Place of Business:**

**Current Mailing Address:**

209 W JACKSON  
STE 301  
CHICAGO, IL 60606

**New Mailing Address:**

**FEI Number:** 72-1048321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BENNET, ALTON  
Address: 757 RAYMOND AVENUE  
City-St-Zip: ST. PAUL, MN 55114

Title: DV  
Name: AMADI, DOROTHY  
Address: 784 BELMONT AVENUE  
City-St-Zip: BROOKLYN, NY 11208

Title: D  
Name: ADAMS, GWEN  
Address: 2414 DESLONDE ST  
City-St-Zip: NEW ORLEANS, LA 70117

Title: STD  
Name: HANKERSON, LYNN E  
Address: 209 W JACKSON STE 301  
City-St-Zip: CHICAGO, IL 60606

Title: D  
Name: JENKINS, LEWIS  
Address: 3333 FANNIN STREET, SUITE 103  
City-St-Zip: HOUSTON, TX 77004

Title: D  
Name: EAKES, MARTIN  
Address: 301 W MAIN ST  
City-St-Zip: DURHAM, NC 27701

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: LYNN E HANKERSON

STD

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date