

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003080

FILED
Jul 25, 2012
Secretary of State

Entity Name: CORPORATION FOR SUPPORTIVE HOUSING, INC.

Current Principal Place of Business:

50 BROADWAY 17TH FLOOR
NEW YORK, NY 10004

New Principal Place of Business:

Current Mailing Address:

50 BROADWAY 17TH FLOOR
NEW YORK, NY 10004

New Mailing Address:

FEI Number: 13-3600232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: CD
Name: O'LEARY, DENISE
Address: 618 MOUNTAIN HOME ROAD
City-St-Zip: WOODSIDE, CA 94062

Title: VCD
Name: CROSBY, DAVID P
Address: 800 NICOLETT MALL, 10TH FLOOR
City-St-Zip: MINNEAPOLIS, MN 55402

Title: P
Name: DE SANTIS, DEBORAH
Address: 50 BROADWAY 17TH FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: S
Name: BAXTER, ELLEN
Address: 583 RIVERSIDE DR
City-St-Zip: NEW YORK, NY 10004

Title: CFO
Name: PROVOST, DAVID
Address: 50 BROADWAY, 17TH FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: D
Name: BACON, KENNETH J
Address: 3900 WISCONSIN AVENUE, MAIL STOP 8H-311
City-St-Zip: WASHINGTON, DC 20016

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: DEBORAH DESANTIS

CEO

07/25/2012

Electronic Signature of Signing Officer or Director

Date