

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005981

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: SALEM HOUSING CORPORATION

**Current Principal Place of Business:**

500 FLOYD ROAD  
CALHOUN, GA 30701

**New Principal Place of Business:**

**Current Mailing Address:**

500 FLOYD ROAD  
CALHOUN, GA 30701

**New Mailing Address:**

FEI Number: 58-1849762      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: DCP ( ) Delete  
Name: COWLEY, ALFRED H  
Address: 500 FLOYD ROAD  
City-St-Zip: CALHOUN, GA 30305

Title: D ( ) Delete  
Name: FOLKENBERG, DONALD L  
Address: 1136 ASCEND LANE  
City-St-Zip: HUDDLESTON, VA

Title: DST ( ) Delete  
Name: LIGHT, GARY  
Address: 1819 HUNTINGTON CHASE  
City-St-Zip: ATLANTA, GA 30305

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FOLKENBERG, DONALD L  
Address: 1136 ASCEND LANE  
City-St-Zip: HUDDLESTON, VA 30701

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALFRED H. COWLEY

Electronic Signature of Signing Officer or Director

PRES

04/09/2007

\_\_\_\_\_ Date