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May 06 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000006335 (2)

1. Corporation Name

COMMUNITY HOUSING CORPORATION OF AMERICA, INC.

Principal Place of Business

Mailing Address

900 2ND AVE S #880
MINNEAPOLIS MN 55402

900 2ND AVE S #880
MINNEAPOLIS MN 55402-3325



3. Date Incorporated or Qualified
12/29/1995

3a. Date of Last Report
05/21/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CARLSON, GARREH G., SR.
4501 TAMiami TRAIL N.
SUITE 216
NAPLES FL 33940

81 Name

Carlson, Garrett G., Sr.

82 Street Address (P.O. Box Number is Not Acceptable)

1330 Galleon Drive

83

84 City

Naples

FL

85

Zip Code
34102

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE
NAME LANDWEHR, SUSAN M
STREET ADDRESS 12920 DEAN PKWY
CITY - ST - ZIP MINNEAPOLIS MN 55416

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 2920 Dean Parkway
1.4 CITY - ST - ZIP

TITLE D ☐ DELETE
NAME HAHNEMAN, GEOFFREY
STREET ADDRESS 340 CT ST
CITY - ST - ZIP PORTSMOUTH VA 23704

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE DS ☐ DELETE
NAME MARTIN, RICHARD H
STREET ADDRESS 150 S 5TH ST #2300
CITY - ST - ZIP MINNEAPOLIS MN 55402

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE D ☒ DELETE
NAME SCHELL, LYNN CARLSON
STREET ADDRESS 900 2ND AVE S #880
CITY - ST - ZIP MINNEAPOLIS MN 55402

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
D
Carlson, Sr., Garrett G.
1330 Galleon Drive
Naples, FL 34102

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
900002175449
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)