## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000006335

FILED Jul 06, 2004 Secretary of State

Entity Name: COMMUNITY HOUSING CORPORATION OF AMERICA, INC.

Current Principal Place of Business:		New Principal Place of Busine	New Principal Place of Business:	
900 2ND A	AVE S			
#875 MINNEAP(	OLIS, MN 55402			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
900 2ND A	AVF S			
#875	OLIS, MN 55402			
FEI Number:	: 36-3728180 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certific	ate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address of New Re	gistered Agent:	
1200 S. PII	RATION SYSTEM NE ISLAND RD. ION, FL 33324 US			
	named entity submits this statement for the $\mbox{\scriptsize  }$ e of Florida.	ourpose of changing its registered office or	registered agent, or both,	
SIGNATUF				
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) Delete LANDWEHR, SUSAN M 3509 CEDAR LAKE AVE MINNEAPOLIS, MN 55416	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	AS () Delete MARTIN, RICHARD H 401 SIBLEY ST #754 SAINT PAUL, MN 55105	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete HOOD, JOHN 69363 6TH AVE COVINGTON, LA 70433	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete MONTEZ, JIM 4508 GARRISON LANE EDINA, MN 55424	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete NELSON, HAPPY 905 CREEKDALE DR RICHARDSON, TX 75080	Title: ( ) Change Name: Address: City-St-Zip:	( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete CIREEN, JANET 7914 RAY BON, #1011 SAN ANTONIO, TX 78218	Title: D (X) Change Name: GREEN, JANET Address: 7106 RAINTREE FORES City-St-Zip: SAN ANTONIO, TX 7823		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSAN LANDWEHR PRES 07/06/2004