2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# F96000006042

Entity Name: WACHOVIA MULTIFAMILY CAPITAL, INC.

Current Principal Place of Business:

7255 WOODMONT AVE.
SUITE 200
BETHESDA, MD 20814

New Principal Place of Business:

301 S. COLLEGE ST
NC 0630
CHARLOTTE, NC 28288

Current Mailing Address:

7255 WOODMONT AVE.
SUITE 200
BETHESDA, MD 20814

New Mailing Address:

301 S. COLLEGE ST
NC 0630
CHARLOTTE, NC 28288

FEI Number: 51-0352032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	SVP	( ) Delete
Name:	JEFFRIES, JR, ROSS E	
Address:	301 SOUTH COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28288	
Title:	D	( ) Delete
Name:	GREEN, WILLIAM C	
Address:	301 SOUTH COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28288	
Title:	D	(X) Delete
Name:	JONES, JR., STEPHEN D	
Address:	1339 CHESTNUT STREET	
City-St-Zip:	PHILADELPHIA, PA 19107	
Title:	D	(X) Delete
Name:	WORLEY, DAVID S	
Address:	301 SOUTH COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28288	
Title:	S	( ) Delete
Name:	DANELLO, TIMOTHY F	
Address:	301 S. COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28288	
Title:	VP	( ) Delete
Name:	MULLIS, CAROL R	
Address:	301 S. COLLEGE STREET	
City-St-Zip:	CHARLOTTE, NC 28288	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL R MULLIS VP 04/05/2005
Electronic Signature of Signing Officer or Director — Date