

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006103

FILED
Feb 15, 2005
Secretary of State

Entity Name: RHA/AFFORDABLE HOUSING III, INC.

Current Principal Place of Business:

3060 PEACHTREE RD NW, STE 900
ATLANTA, GA 30305

New Principal Place of Business:

3060 PEACHTREE ROAD, NW
ONE BUCKHEAD PLAZA, SUITE 900
ATLANTA, GA 30305

Current Mailing Address:

3060 PEACHTREE RD NW, STE 900
STE-1150
ATLANTA, GA 30305

New Mailing Address:

3060 PEACHTREE ROAD, NW
ONE BUCKHEAD PLAZA, SUITE 900
ATLANTA, GA 30305

FEI Number: 58-2440916

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COATS, BRYANT G
Address: 3060 PEACHTREE RD NW, STE 900
City-St-Zip: ATLANTA, GA 30305

Title: EVPD () Delete
Name: SIMMONS, GORDON
Address: 1200 RIDGEFIELD BLVD., SUITE 270
City-St-Zip: ASHEVILLE, NC 28806

Title: SD () Delete
Name: NORTHCUTT III, CHARLES W
Address: 600 MONUMENT STREET
City-St-Zip: DOTHAN, AL 36303

Title: CFO () Delete
Name: WEST, JOHN
Address: 3060 PEACHTREE RD NW, STE 900
City-St-Zip: ATLANTA, GA 30305

Title: CD () Delete
Name: COATS JR, ROBERT B
Address: 330 DAWN BROOK DR.
City-St-Zip: FLAT ROCK, NC 28731

Title: D () Delete
Name: OAKES, HOWARD
Address: 3060 PEACHTREE ROAD, NW, SUITE 910
City-St-Zip: ATLANTA, GA 30305

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: JOHN R. WEST

CFO

02/15/2005

Electronic Signature of Signing Officer or Director

Date