2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000050821

Entity Name: MULTI-FAMILY HOUSING CAPITAL, L.L.C.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

329 N. PARK AVENUE STE 300 WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

P.O. BOX 4961 329 N. PARK AVENUE ORLANDO, FL 328024961 STE 300

WINTER PARK, FL 32789

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 NORTH ORANGE AVE.
SUITE 1400
ORLANDO, FL 32801 US
SCIARRINO, MICHAEL J MGR
329 N PARK AVENUE
SUITE 300
WINTER PARK, FL 32789 US

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: MICHAEL J SCIARRINO 04/15/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MISSIGMAN, PAUL
 Name:

 Address:
 329 N. PARK AVENUE, STE 300
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 SCIARRINO, MICHAEL J
 Name:

 Address:
 329 N. PARK AVENUE, STE 300
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL J SCIARRINO MGR 04/15/2009