2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2005
Secretary of State

DOCUMENT# N35364

Entity Name: RHA/FERN PARK MR, INC.

Current Principal Place of Business:

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

New Principal Place of Business:

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

Current Mailing Address:

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

New Mailing Address:

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

FEI Number: 58-1869282 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	COATS, BRYANT G	
Address:	3060 PEACHTREE RD NW, STE 900	
City-St-Zip:	ATLANTA, GA 30305	
Title:	D	( ) Delete
Name:	BRADEEN, CHET H	
Address:	1170 BAWDEN CIRCLE	
City-St-Zip:	MILWAUKEE, WI 53045	
Title:	D	( ) Delete
Name:	OAKES, HOWARD	
Address:	3060 PEACHTREE ROAD, SUITE 910	
City-St-Zip:	ATLANTA, GA 30305	
Title:	D	( ) Delete
Name:	WALKER, WILLIAM P	
Address:	224 QUAIL LANE, LAKEMARTIN	
City-St-Zip:	DADEVILLE, AL 36853	
Title:	CFO	( ) Delete
Name:	WEST, JOHN R	
Address:	3060 PEACHTREE RD NW, STE 900	
City-St-Zip:	ATLANTA, GA 30305	
Title:	CD	( ) Delete
Name:	COATS, ROBERT B JR	
Address:	330 DAWNBROOK DRIVE	
City-St-Zip:	FLAT ROCK, NC 28731	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN R. WEST CFP 02/15/2005

Electronic Signature of Signing Officer or Director — Date