2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000078206

1. Entity Name
HOUSING AMERICA FINANCE, INC.

Principal Place of Business	Mailing Address
104 ROGUES ROOST DRIVE AUSTIN, TX 78734	P O BOX 342318 AUSTIN, TX 78734

04152004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3597787
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

AUSTIN, BETTINA M
7813 NORTH LAGOON DRIVE, 9E
PANAMA CITY BEACH, FL 32408

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Bettina M. Austin BETTINA M. AUSTIN, PRESIDENT 4-16-04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000121209
04/20/04-80041-015 150.00

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	AUSTIN, BETTINA M
STREET ADDRESS	104 ROGUES ROOST DR
CITY-ST-ZIP	AUSTIN, TX 78734
TITLE	VP
NAME	CREIGHTON, THOMAS G
STREET ADDRESS	104 ROGUES ROOST DRIVE
CITY-ST-ZIP	AUSTIN, TX 78734
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bettina M. Austin BETTINA M. AUSTIN, PRESIDENT 4-16-04 512-608-0843
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #