## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000099

Entity Name: RHA COMMUNITY HOMES, INC.

**Current Principal Place of Business:** 

3060 PEACHTREE ROAD, NW

ONE BUCKHEAD PLAZA, SUITE 900 ATTN: PETER M. WRIGHT

ATLANTA, GA 30305

**Current Mailing Address:** 

3060 PEACHTREE ROAD, NW

ONE BUCKHEAD PLAZA, SUITE 900 ATTN: PETER M. WRIGHT

ATLANTA, GA 30305 US

FEI Number: 58-2287349 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Date

Date

FILED Feb 13, 2013

**Secretary of State** 

CC3467010694

Officer/Director Detail:

Title PD Title D

Name COATS, BRYANT G Name OAKES, HOWARD

Address 3060 PEACHTREE ROAD, NW, SUITE Address 3060 PEACHTREE ROAD, NW, SUITE

91

DADEVILLE FL 36853

City-State-Zip:

City-State-Zip: ATLANTA GA 30305 City-State-Zip: ATLANTA GA 30305

Title CFOV Title D

Name WEST, JOHN R Name WALKER, WILLIAM P

Address 3060 PEACHTREE ROAD, NW, SUITE Address 224 QUAIL LN LAKE MARTIN

900

City-State-Zip: ATLANTA GA 30305

Title VPAS

Name NORTHCUTT, CHASE NORTHCUTT, CHARLES WIII

Address 3060 PEACHTREE ROAD, NW., S900 Address 100 CAMELLIA DRIVE

City-State-Zip: DOTHAN AL 36302

I hereby 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 all other like empowered.

SIGNATURE: JOHN R. WEST CFO 02/13/2013