

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91617 036 ****61.25

DOCUMENT # 768977

1. Entity Name

TALLAHASSEE RHF HOUSING, INC.

Principal Place of Business

1433 NO ADAMS STR
 TALLAHASSEE FL 32303-5562
 US

Mailing Address

C/O RHF 911 STUDEBAKER RD
 LONG BEACH CA 90815-4900
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2314057

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NRAI SESRVICES, INC.
526 EAST PARK AVE.
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Delete
NAME	JOSEPH, LAVERNE R	
STREET ADDRESS	911 N STUDEBAKER ROAD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	
TITLE	DT	<input type="checkbox"/> Delete
NAME	MASUDA, TOM S	
STREET ADDRESS	911 N STUDEBAKER ROAD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	
TITLE	DV	<input type="checkbox"/> Delete
NAME	KING, DONALD W	
STREET ADDRESS	911 N STUDEBAKER RD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, JEAN	
STREET ADDRESS	911 N STUDEBAKER RD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	
TITLE	S	<input type="checkbox"/> Delete
NAME	LISTOE, LINDA	
STREET ADDRESS	911 N STUDEBAKER RD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	
TITLE	D	<input type="checkbox"/> Delete
NAME	TRNKA, JOHN	
STREET ADDRESS	911 N STUDEBAKER RD	
CITY-ST-ZIP	LONG BEACH CA 90815-4900	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 617, 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:

Linda Listoe
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Linda Listoe

4/17/2002
 Date

562/257.5100
 Daytime Phone #

CR2E037 (9/01)