

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

008828

DOCUMENT # N16905

1. Entity Name

HOLLY HILL RHF HOUSING, INC.

04-26-2001 90238 048 ****61.25

Principal Place of Business		Mailing Address	
C/O ADMINISTRATOR 900 ELEVENTH STREET HOLLY HILL FL 32117-3113 US		C/O RHF 5150 E PACIFIC COAST HIGHWAY, SUITE 600 LONG BEACH CA 90804-3312 US	



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 900 LPGA Boulevard	3. Mailing Address 911 N. Studebaker Road
Suite, Apt. #, etc.	Suite, Apt. #, etc. c/o RHF

City & State Holly Hill, FL	City & State Long Beach, CA	4. FEI Number 59-2742497	Applied For Not Applicable
Zip 32117	Country USA	Zip 90815-4900	Country USA

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NRAI SERVICES INC 526 E 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MARGETIC, STEPHEN J. 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Masuda, Tom S. 911 N. Studebaker Road Long Beach, CA 90815-4900	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, JEAN 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	911 N. Studebaker Road Long Beach, CA 90815-4900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRNKA, JOHN E. 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	911 N. Studebaker Road Long Beach, CA 90815-4900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LISTOE, LINDA 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S 911 N. Studebaker Road Long Beach, CA 90815-4900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOSEPH, LAVERNE R. 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	911 N. Studebaker Road Long Beach, CA 90815-4900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KING, DONALD W 5150 E. PACIFIC COAST HWY, STE. 600 LONG BEACH CA 90804-3312	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD 911 N. Studebaker Road Long Beach, CA 90815-4900	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 **REQUIRED** Listoe 4/14/2001 562.257.5100
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)