

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38341

FILED
Jan 29, 2009
Secretary of State

Entity Name: AFFORDABLE COMMUNITY HOUSING TRUST - ALPHA, INC.

Current Principal Place of Business:

7901 LA RIVIERA DRIVE
SACRAMENTO, CA 95826 US

New Principal Place of Business:

14114 DALLAS PARKWAY
SUITE 26
DALLAS, TX 75254 US

Current Mailing Address:

14114 DALLAS PARKWAY
SUITE 265
DALLAS, TX 75254 US

New Mailing Address:

FEI Number: 94-3130128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IMPERIAL CLUB
2751 N.E. 183RD ST.
NORTH MIAMI BEACH, FL 33160 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: PCD () Delete
Name: PADEN, JON M
Address: 233 E. BETHEL ROAD
City-St-Zip: COPPELL, TX 75019

Title: TD () Delete
Name: RAPP, PHILIP
Address: 6529 CLIFTON ROAD
City-St-Zip: CLIFTON, VA 20124

Title: D () Delete
Name: RAPP, PHILIP
Address: 6529 CLIFTON STREET
City-St-Zip: CLIFTON, VA 20124

Title: D () Delete
Name: CHRISMAN, STEVE
Address: 6517 RIVER BDGE ROAD
City-St-Zip: DALLAS, TX 75024

Title: D () Delete
Name: JOHNSTON, RON
Address: SPRING CREEK MED, PLAZA, SUITE 220
City-St-Zip: FORT COLLINS, CO 80526

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SCOT OVERBEY

ED

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date