

SCC eFile

2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

214519437

1.) CORPORATION NAME:

THE COMMUNITY HOUSING FINANCE CORPORATION

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JASON FRIESS
2100 CLARENDON BLVD
SUITE 501**

SCC ID NO: **02055895**

5.) STOCK INFORMATION

| | |
|-------|------------|
| CLASS | AUTHORIZED |
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ARLINGTON, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2100 CLARENDON BLVD
STE 501

CITY/ST/ZIP: ARLINGTON, VA 22201

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

| | | | |
|-----------------|---------------------|---|--|
| NAME: | PATRICIA MCGRADY | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | PRESIDENT | | |
| ADDRESS: | 2123 NORTH 19TH ST | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22201 | | |

| | | | |
|-----------------|-----------------------------|---|--|
| NAME: | JASON FRIESS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | TREASURER | | |
| ADDRESS: | 2100 CLARENDON BLVD STE 501 | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22201 | | |

| | | | |
|-----------------|------------------------|---|--|
| NAME: | LIBBY ROSS | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | SECRETARY | | |
| ADDRESS: | 4178 NORTH 39TH STREET | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22207 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | DEAN BONNEY | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 4029 S 7TH ST | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22207 | | |

| | | | |
|-----------------|---------------------|----------------------------------|--|
| NAME: | JONATHAN C KINNEY | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE: | DIRECTOR | | |
| ADDRESS: | 2350 N LINCOLN ST | | |
| CITY/ST/ZIP/CO: | ARLINGTON, VA 22013 | | |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JASON FRIESS

JASON FRIESS, TREASURER

4/15/2014

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE
TITLE

DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.