

1.) CORPORATION NAME:

**RHA/HOUSING, INC.**

DUE DATE: **3/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1852187**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**GA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3060 PEACHTREE ROAD NW SUITE 900

CITY/ST/ZIP: ATLANTA, GA 30305

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:	GORDON J SIMMONS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXE VP/COO		
ADDRESS:	17 CHURCH STREET		
CITY/ST/ZIP/CO:	ASHEVILLE, NC 28801		
NAME:	BRYANT G GOATS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO		
ADDRESS:	3060 PEACHTREE ROAD NW		
CITY/ST/ZIP/CO:	ATLANTA, GA 30305		
NAME:	CHARLES W NORTHCUTT III	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	100 CAMELLIA DRIVE		
CITY/ST/ZIP/CO:	DOTHAN, AL 36303		
NAME:	JAMES D LOFTIN JR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	110 ANA LEE DRIVE		
CITY/ST/ZIP/CO:	DOTHAN, AL 36303		
NAME:	CHET H BRADEEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1170 BAWDEN CIRCLE		
CITY/ST/ZIP/CO:	BROOKFIELD, WI 53045		
NAME:	JOHN R. WEST	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	3060 PEACHTREE ROAD, NW SUITE 900		
CITY/ST/ZIP/CO:	ATLANTA, GA 30305		

NAME: ROBERT B. COATS, JR. TITLE: DIRECTOR ADDRESS: 9322 CREEKSIDE TRAIL CITY/ST/ZIP/CO: STONE MOUNTAIN, GA 30087	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: HOWARD OAKES TITLE: DIRECTOR ADDRESS: 3060 PEACHTREE ROAD, NW CITY/ST/ZIP/CO: SUITE 900 ATLANTA, GA 30305	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: WILLIAM P. WALKER TITLE: DIRECTOR ADDRESS: 224 QUAIL LANE CITY/ST/ZIP/CO: DADEVILLE, GA 36853	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TIM CARSSOW TITLE: DIRECTOR ADDRESS: 938 LITTLE RIVER CAMPGROUND ROAD CITY/ST/ZIP/CO: PISGHA FOREST, NC 28768	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALISON DRUMMOND TITLE: DIRECTOR ADDRESS: 3452 GREYSTONE COURT CITY/ST/ZIP/CO: MARIETTA, GA 30068	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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/ JOHN R.WEST SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN R.WEST, PRINTED NAME AND CORPORATE TITLE	5/3/2012 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.		