

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000269

FILED  
Apr 09, 2009  
Secretary of State

Entity Name: AMERICAHOMEKEY, INC.

## Current Principal Place of Business:

3838 OAK LAWN AVENUE  
SUITE 1050  
DALLAS, TX 75219

## New Principal Place of Business:

## New Mailing Address:

## Current Mailing Address:

3838 OAK LAWN AVENUE  
SUITE 1050  
DALLAS, TX 75219

3824 CEDAR SPRINGS ROAD  
SUITE 442  
DALLAS, TX 75219

FEI Number: 75-2888829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHWARTZ, TERENCE S  
141 NE 3 AVENUE  
SUITE 601  
MIAMI, FL 33132 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: TERRELL, LANE  
Address: 3838 OAK LAWN AVE., #1050  
City-St-Zip: DALLAS, TX 75219

Title: D ( ) Delete  
Name: SHADLE, KATHERINE A  
Address: 3838 OAK LAWN AVE., #1050  
City-St-Zip: DALLAS, TX 75219

Title: D ( ) Delete  
Name: CAUGHRON, FRANK  
Address: 3838 OAK LAWN AVE., #1050  
City-St-Zip: DALLAS, TX 75219

Title: D ( ) Delete  
Name: TERRELL, BUDDY L  
Address: 3838 OAK LAWN AVE., #1050  
City-St-Zip: DALLAS, TX 75219

Title: D ( ) Delete  
Name: PIGNOULO, CHARLES J  
Address: 2200 POST OAK BLVD., STE 700  
City-St-Zip: HOUSTON, TX 77056

Title: S ( ) Delete  
Name: ALCAZAR, IDA  
Address: 3838 OAK LAWN AVE., #1050  
City-St-Zip: DALLAS, TX 75219

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK CAUGHRON

VP

04/09/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date