

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001189

Entity Name: AIF HOLDING COMPANY

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

PARK WEST TWO, 6TH FL  
2000 CLIFF MINE ROAD  
PITTSBURGH, PA 15275

## New Principal Place of Business:

## Current Mailing Address:

PARK WEST TWO, 6TH FL  
2000 CLIFF MINE ROAD  
PITTSBURGH, PA 15275

## New Mailing Address:

FEI Number: 25-1866554

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUTT, JAMES L  
28861 CAVELL TERRACE  
NAPLES, FL 34119 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: PTD ( ) Delete  
Name: PUTT, BRYAN S  
Address: 119 SIMMONS ROAD  
City-St-Zip: MCMURRAY, PA 15317

Title: SD ( ) Delete  
Name: PUTT, JAMES L  
Address: 28861 CAVELL TERRACE  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BRYAN S. PUTT

PTD

03/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date