

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000061989

FILED
Jan 25, 2007
Secretary of State

Entity Name: AMERICAN FINANCE COMPANY OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

298 US HWY 90 EAST
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

Current Mailing Address:

29 N EGLIN PARKWAY
FT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 59-3264062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEASLEY, J L
29 N EGLIN PARKWAY
FT WALTON BEACH, FL 32548 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: D () Delete
Name: TRINGAS, JOHN J
Address: 29 N EGLIN PARKWAY
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: TRINGAS, ALEX J
Address: 29 N EGLIN PARKWAY
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: TRINGAS, LARK
Address: 29 N EGLIN PARKWAY
City-St-Zip: FT WALTON BEACH, FL 32548

Title: PD () Delete
Name: BEASLEY, LARRY J SR
Address: 29 N EGLIN PARKWAY
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: HOLLAND, MARCUS
Address: 29 EGLIN PARKWAY
City-St-Zip: FT WALTON BEACH, FL

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 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: J. LARRY BEASLEY, SR.

PD

01/25/2007

Electronic Signature of Signing Officer or Director

Date