2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001715

Entity Name: FIRST AMERICAN HOME BUYERS PROTECTION CORPORATION

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
7833 HASKELL AVE VAN NUYS, CA 91406					
Current Mailing Address:			New Mailing Address:		
P.O. BOX 10180 VAN NUYS, CA 914100180					
FEI Number:	95-3898805	FEI Number Applied For () FEI Num	nber Not Appli	cable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DRIVE SUITE A TALLAHASSEE, FL 32301 US					
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: ADD				S/CHANGE	S TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	VD () E GLEASON, ERIC 25852 FORSYTH STEVENSON RAI		Title: Name: Address: City-St-Zip:	GLEASON, EI 25852 FORS	
Title: Name: Address: City-St-Zip:	PD () E LANGSTON, DAN 2734 N. LOS PIN CAMARILLO, CA	OS CIRCLE	Title: Name: Address: City-St-Zip:	(() Change () Addition
Title: Name: Address: City-St-Zip:	VTD () E ROUPE, CARLA 7858 HANNA AVE CANOGA PARK,		Title: Name: Address: City-St-Zip:	ROUPE, CAR 7858 HANNA	
Title: Name: Address: City-St-Zip:	VSD () E NAGASAWA, DEI 5508 N. JON DOI AGOURA HILLS,	DSON DRIVE	Title: Name: Address: City-St-Zip:	NAGASAWA, 5508 N. JON	(X) Change () Addition DEBRA DODSON DRIVE LS, CA 91301
Title: Name: Address: City-St-Zip:	VD () E HAVAS, MAGGI 30014 PRIMROS SAUGUS, CA 91		Title: Name: Address: City-St-Zip:	V (HAVAS, MAGG 30014 PRIME SAUGUS, CA	ROSE DRIVE
Title: Name: Address: City-St-Zip:	VD () E GOLDSMITH, KA 23311 PALOMA E MALIBU, CA 902	BLANCA	Title: Name: Address: City-St-Zip:	V (GOLDSMITH, 23311 PALON MALIBU, CA	MA BLANCA

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: CARLA ROUPE VT 04/28/2009