

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007057

FILED
Apr 28, 2009
Secretary of State

Entity Name: AHA FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

ONE NORTH FRANKLIN
CHICAGO, IL 60606

New Principal Place of Business:

Current Mailing Address:

ONE NORTH FRANKLIN
CHICAGO, IL 60606

New Mailing Address:

FEI Number: 36-3076454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: BURKE, ANTHONY J
Address: ONE NORTH FRANKLIN ST., 30TH FL
City-St-Zip: CHICAGO, IL

Title: D () Delete
Name: ANTHONY, PAULA E
Address: 1000 S BECKHAM
City-St-Zip: TYLER, TX 75701

Title: PCEO () Delete
Name: BURKE, ANTHONY J
Address: ONE NORTH FRANKLIN 30TH FLOOR
City-St-Zip: CHICAGO, IL 60606

Title: D () Delete
Name: HARMON, CHERYL
Address: 1400 W PARK STREET
City-St-Zip: URBANA, IL 61801

Title: D () Delete
Name: JESUELE, NEIL J
Address: ONE NORTH FRANKLIN, 29TH FLOOR
City-St-Zip: CHICAGO, IL 60606

Title: VP () Delete
Name: BUZACHERO, VICTOR
Address: 4275 CAMPUS POINT COURT
City-St-Zip: SAN DIEGO, CA 92121

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: COLEMAN, DAN C
Address: 250 EAST DUNLAP AVENUE
City-St-Zip: PHOENIX, AZ 85020

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: RICHARD J. EVANS

CFO

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date