

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002288

FILED
Jan 05, 2011
Secretary of State

Entity Name: AMERICAN SAVERS BUSINESS ALLIANCE, INC.

Current Principal Place of Business:

16476 WILD HORSE CREEK ROAD
2ND FLOOR
CHESTERFIELD, MO 63017

New Principal Place of Business:

Current Mailing Address:

16476 WILD HORSE CREEK ROAD
2ND FLOOR
CHESTERFIELD, MO 63017

New Mailing Address:

FEI Number: 43-1606993

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

OFFICERS AND DIRECTORS:

Title: SD
Name: MARTIN, JANE
Address: 3463 STATE STREET #375
City-St-Zip: SANTA BARBARA, CA

Title: PD
Name: GRAVES, JANE
Address: 468 PLEASANT AVENUE
City-St-Zip: ASTORIA, OR 97103

Title: TD
Name: SCHAEFER, KURT
Address: 106 TUSCANY DRIVE
City-St-Zip: DESTIN, FL 32541

Title: D
Name: LAWSON, CHUCK
Address: P O BOX 5895
City-St-Zip: DESTIN, FL 32540

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JANE GRAVES

PRES

01/05/2011

Electronic Signature of Signing Officer or Director

Date