## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000003526

Entity Name: AHM RES II GP, INC.

FILED Jan 21, 2004 Secretary of State

Entity Nai	Me: AHM RE	SII GP, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
	H THIRD STRE ND, VA 23219	EET		
Current Mailing Address:			New Mailing Address:	
	H THIRD STRE ID, VA 23219	ΞΕΤ		
FEI Number	: 02-0618381	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
1200 SOU	PORATION SY ITH PINE ISLA ION, FL 3332	ND ROAD		
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financir	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCD ( KNIGHT, GLAI 10 SOUTH THI RICHMOND, V	RD STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VS ( HART, J. PHIL 10 SOUTH THI RICHMOND, V	RD STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VT ( MCKENNEY, I 10 SOUTH THI RICHMOND, V	RD STREET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( HORNE, ARLE 1209 ORANGE WILMINGTON	STREET	Address: 1209 ORA	(X) Change()Addition .DRIANNE M .NGE STREET TON. DE 19801

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLADE M. KNIGHT PCD 01/21/2004