

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000005070

Entity Name: AFS BROKERAGE, INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

7840 E. BERRY PL. #200
GREENWOOD VILLAGE, CO 80111

New Principal Place of Business:

5300 BEE CAVES ROAD, BLDG. 3
STE. 200
AUSTIN, TX 78746 US

Current Mailing Address:

7840 E. BERRY PL. #200
GREENWOOD VILLAGE, CO 80111

New Mailing Address:

5300 BEE CAVES ROAD, BLDG. 3
STE. 200
AUSTIN, TX 78746 US

FEI Number: 84-1123627

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: CT CORPORATION SYSTEM

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRAHAM, RICHARD J
Address: 7840 E. BERRY PL. #200
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: D () Delete
Name: GRAHAM, LARRY L
Address: 7840 E. BERRY PL. #200
City-St-Zip: GREENWOOD VILLAGE, CO 80111

Title: S (X) Delete
Name: LEAKE, JAMES D
Address: 7901 E BELLEVIEW
City-St-Zip: ENGLEWOOD, CO 80111

Title: P (X) Delete
Name: KESSELL, JOSEPH K
Address: 7840 E BERRY PL, # 200
City-St-Zip: ENGLEWOOD, CO 80111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GIOIA, ROBERT MR.
Address: 5300 BEE CAVES ROAD, BLDG. 3, STE. 200
City-St-Zip: AUSTIN, TX 78746 US

Title: P (X) Change () Addition
Name: SHADE, KENNETH MR.
Address: 5300 BEE CAVES ROAD, BLDG.3, STE. 200
City-St-Zip: AUSTIN, TX 78746 US

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: KENNETH SHADE

Electronic Signature of Signing Officer or Director

P

01/09/2007

Date