2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2008
Secretary of State

DOCUMENT# F03000005529

Entity Name: AMERICAN FAMILY ARCHIVES & CHRONICLES, INC.

Current Principal Place of Business:

3830 S. HIGHWAY A1A SUITE 4-133
MELBOURNE, FL 32951

New Principal Place of Business:

Current Mailing Address:

3830 S. HIGHWAY A1A SUITE 4-133
MELBOURNE, FL 32951

New Mailing Address:

FEI Number: 51-0381726 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORTHWOOD, SUSAN E
3830 S. HIGHWAY A1A SUITE 4-133
MELBOURNE, FL 32951 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

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: P ( ) Delete
Name: NORTHWOOD, SUSAN E
Address: 130 IBIS DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DV ( ) Delete
Name: EVELAND, RICHARD T
Address: 142 RURITAN RIDGE LANE
City-St-Zip: SCOTTSVILLE, VA 24590

Title: TS ( ) Delete
Name: MURRAY, PATRICIA A
Address: 711 SANDY HILL ROAD
City-St-Zip: WYNDMOOR, PA 19038

Title: C ( ) Delete
Name: DAVID, GEORGE A
Address: 200 TRIANNON LANE
City-St-Zip: VILLANOVA, PA 19083

Title: D ( ) Delete
Name: SCHUH, WAYNE M
Address: 1109 BEECH ROAD
City-St-Zip: ROSEMONT, PA 19010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: SUSAN E. NORTHWOOD P 05/09/2008

Electronic Signature of Signing Officer or Director — Date