2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005427

Name:

Address:

City-St-Zip:

MCDONALD, BRENDA G

WILMINGTON, NC 28409

122 RIDGEWAY ROAD

Entity Name: AMERICAN HARBOR MORTGAGE CO

FILED Feb 01, 2006 Secretary of State

Entity Nar	ne: AMER	KICAN HARBOR MIC	RTGAGE CO.					
Current Principal Place of Business:				New Principal Place of Business:				
108 GILES WILMINGT								
Current Mailing Address:				New Mailing Address:				
108 GILES WILMINGT								
FEI Number: 46-0504001 FEI Number Applied For (olied For ()	FEI Number Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
HEARD, F 1421 SE 1- DEERFIEL The above in the State	4TH COUF .D, FL 334 named en	41 US tity submits this state	ement for the pur	oose of changing it	s registered	l office or registered agent, o	or both,	
SIGNATUR								
Election Car		tronic Signature of F	•			Date		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:		() Delete R. BRUCE OS END COURT ON, NC 28409		Title: Name: Address: City-St-Zip:	HOLSTEN, R 5605 LANDS	(X) Change()Addition . BRUCE END COURT N, NC 28409		
Title: Name: Address: City-St-Zip:	5605 LANE	() Delete PATRICIA L OS END COURT ON, NC 28403		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title:	DVP	(X) Delete		Title:		() Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: R. BRUCE HOLSTEN P 02/01/2006