2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000894

Entity Name: AGFS MORTGAGE LENDING, INC.

FILED Apr 20, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	COND STREE E, IN 47708	T				
Current Mailing Address:			New Mailin	New Mailing Address:		
601 NW SECOND STREET EVANSVILLE, IN 47708						
FEI Number: 2	20-3894515	FEI Number Applied For () FEI	Number Not Appli	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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.						
SIGNATUR		Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CFOD () EBREIVOGEL, DO 601 NW SECONI EVANSVILLE, IN	O STREET	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	VD () C GARDNER, DANI 601 NW SECONI EVANSVILLE, IN	O STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SRV () E BREIVOGEL, DO 601 NW SECONI EVANSVILLE, IN	O STREET	Title: Name: Address: City-St-Zip:	DSV (X) Change () Addition BREIVOGEL, DONALD R JR. 601 NW SECOND STREET EVANSVILLE, IN 47708		
Title: Name: Address: City-St-Zip:	PD ()E ROACH, GEORG 601 NW SECONI EVANSVILLE, IN	E D D STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	ATO () E BLYTHE, TIMOTH 601 NW SECONI EVANSVILLE, IN	O STREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () E BINYON, BRYAN 601 NW SECONI EVANSVILLE, IN	O STREET	Title: Name: Address: City-St-Zip:	VPT (X) Change () Addition BINYON, BRYAN A 601 NW SECOND STREET EVANSVILLE, IN 47708		

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: TIMOTHY W. BLYTHE ATO 04/20/2009