

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001882

FILED
Mar 31, 2009
Secretary of State

Entity Name: CLEARINGHOUSE COMMUNITY DEVELOPMENT FINANCIAL INSTITUTION CORPORATION

Current Principal Place of Business:

23861 EL TORO ROAD
SUITE 401
LAKE FOREST, CA 92630

New Principal Place of Business:

Current Mailing Address:

23861 EL TORO ROAD
SUITE 401
LAKE FOREST, CA 92630

New Mailing Address:

FEI Number: 33-0735318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: BYSTRY, DOUGLAS J
Address: 23861 EL TORO ROAD #401
City-St-Zip: LAKE FOREST, CA 92630

Title: S () Delete
Name: LEVY, DAVID
Address: 201 SO. BROADWAY
City-St-Zip: SANTA ANA, CA 92630

Title: T () Delete
Name: DEMOTTE, MELISSA
Address: 23861 EL TORO ROAD SUITE 401
City-St-Zip: LAKE FOREST, CA 92630

Title: D () Delete
Name: NEAL, PAT
Address: 4316 HILLSIDE ROAD
City-St-Zip: BREA, CA 92823

Title: D () Delete
Name: ORECHWA, ALAN
Address: 2727 EAST IMPERIAL HIGHWAY
City-St-Zip: BREA, CA 92618

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: MELISSA BROWN

_____ Electronic Signature of Signing Officer or Director

DIR

03/31/2009

_____ Date