2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000712

Entity Name: FIRST MUTUAL SALES FINANCE, INC.

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
425 PIKE S SEATTLE,					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
425 PIKE ST SEATTLE, WA 98101					
FEI Number: 26-1819209 FEI Number Applied For () FEI Number			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
INCORPORATING SERVICES, LTD. 1540 GLENWAY DRIVE TALLAHASSEE, FL 32301 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					
	Electron	ic Signature of Registered Agent		Date	
Election Carr	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP () WHITEHEAD, R 425 PIKE ST SEATTLE, WA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () HEDLUND, EDV 425 PIKE ST SEATTLE, WA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () BEARDALL, BR 425 PIKE ST SEATTLE, WA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () TAYLOR, KEITH 425 PIKE ST SEATTLE, WA	1 D	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BROWER, LINE 425 PIKE ST SEATTLE, WA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () JACOBSON, JA 425 PIKE ST SEATTLE, WA		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRENT J. BEARDALL TREA 03/25/2009