2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# F08000004182

Entity Name: AMERICANS FOR AFFORDABLE HEALTHCARE, INC.

Current Principal Place of Business:

ONE SOUTH LIMESTONE STREET STE 301
SPRINGFIELD, OH 45502

New Principal Place of Business:

ONE SOUTH LIMESTONE STREET
SUITE 301
SPRINGFIELD, OH 45502

Current Mailing Address:

ONE SOUTH LIMESTONE STREET STE 301
SPRINGFIELD, OH 45502

New Mailing Address:

PO BOX 2549
SPRINGFIELD, OH 45501

FEI Number: 33-1027683 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

OFFICERS AND DIRECTORS:

Title: DV ( ) Delete
Name: COOKE, CRAIG
Address: 220 OLD SPRINGFIELD RD
City-St-Zip: SOUTH CHARLESTON, OH 45368

Title: D ( ) Delete
Name: RYAN, SEAN
Address: 433 W LEFFE LANE
City-St-Zip: SPRINGFIELD, OH 45506

Title: DST ( ) Delete
Name: RYAN, SEAN
Address: ONE SOUTH LIMESTONE STREET STE 301
City-St-Zip: SPRINGFIELD, OH 45502

Title: P ( ) Delete
Name: THOMAS, TERRI
Address: ONE SOUTH LIMESTONE STREET STE 301
City-St-Zip: SPRINGFIELD, OH 45502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: COOKE, CRAIG
Address: 220 OLD SPRINGFIELD RD
City-St-Zip: SOUTH CHARLESTON, OH 45368

Title: DIR (X) Change ( ) Addition
Name: RYAN, SEAN
Address: 433 W LEFFE LANE
City-St-Zip: SPRINGFIELD, OH 45506

Title: TRES (X) Change ( ) Addition
Name: HARRIS, NANCY
Address: ONE SOUTH LIMESTONE STREET STE 301
City-St-Zip: SPRINGFIELD, OH 45502

Title: PRES (X) Change ( ) Addition
Name: THOMAS, TERRI
Address: ONE SOUTH LIMESTONE STREET STE 301
City-St-Zip: SPRINGFIELD, OH 45502

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI THOMAS PRES 01/12/2009

Electronic Signature of Signing Officer or Director — Date