

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F08000004647

FILED
Jul 14, 2009
Secretary of State**Entity Name:** AMERICAN HOME MORTGAGE LENDING SOLUTIONS, INC.**Current Principal Place of Business:**4650 REGENT BLVD., SUITE 100
IRVING, TX 75063 US**New Principal Place of Business:****Current Mailing Address:**4600 REGENT BLVD., SUITE 200
IRVING, TX 75063 US**New Mailing Address:****FEI Number:** 26-3258828**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: S () Delete
Name: CHARLES
Address: 6501 IRVINE CENTER DR. IRVINE CA 92618
City-St-Zip: IRVINE, CA 92618 US

Title: P () Delete
Name: FRIEDMAN, DAVID
Address: 4600 REGENT BLVD STE 200
City-St-Zip: IRVING, TX 75063 US

Title: S () Delete
Name: DORCHUCK, JORDAN
Address: 4600 REGENT BLVD., SUITE 200
City-St-Zip: IRVING, TX 75063 US

Title: T () Delete
Name: PINO, CRAIG
Address: 4600 REGENT BLVD., SUITE 200
City-St-Zip: IRVING, TX 75063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: CAMPBELL, CHARLES
Address: 6501 IRVINE CENTER DR. IRVINE CA 92618
City-St-Zip: IRVINE, CA 92618 US

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: CHARLES CAMPBELL

S

07/14/2009

Electronic Signature of Signing Officer or Director

Date