

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003992

FILED  
Jan 07, 2005  
Secretary of State

**Entity Name:** AMERICAN ASSOCIATION FOR FINANCIAL INSTITUTION SERVICES CORPORATION

**Current Principal Place of Business:**

C/O ASSURANT GROUP  
11222 QUAIL ROOST DRIVE  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ASSURANT GROUP  
11222 QUAIL ROOST DRIVE  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 75-2337610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: D ( ) Delete  
Name: BECK, JERRY D  
Address: 1410 WHITE CHAPEL ROAD  
City-St-Zip: SOUTHLAKE, TX 76092 SD

Title: SD ( ) Delete  
Name: HEGGEN, ARTHUR  
Address: 9611 SOUTHWEST 72ND COURT  
City-St-Zip: MIAMI, FL

Title: T ( ) Delete  
Name: CASTELO, ENRIQUE  
Address: 9756 N.W. 29TH ST.  
City-St-Zip: MIAMI, FL

Title: DP ( ) Delete  
Name: COOPER, MARK  
Address: POBOX 535578  
City-St-Zip: GRAND PRAIRIE, TX 75053

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARTHUR HEGGEN

S/D

01/07/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date