

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K86880

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: AGENTS FINANCIAL SERVICES CORP.

## Current Principal Place of Business:

5147 FOX HUNT DRIVE  
WESLEY CHAPEL, FL 33543 US

## New Principal Place of Business:

34 PLANTATION HOMES DRIVE  
DAUFUSKIE ISLAND, SC 29938 US

## Current Mailing Address:

PO BOX 6807  
HILTON HEAD ISLAND, SC 29938 US

## New Mailing Address:

FEI Number: 65-0121341      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSTON, MCRAE B  
5147 FOX HUNT DRIVE  
WESLEY CHAPEL, FL 33543 US

## Name and Address of New Registered Agent:

JOHNSTON, MCRAE B  
1302 CALDER ROAD  
KEY LARGO, FL 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.

SIGNATURE:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PC ( ) Delete  
Name: JOHNSTON, MCRAE B  
Address: PO BOX 6807  
City-St-Zip: HILTON HEAD ISLAND, SC 29938

Title: ST ( ) Delete  
Name: DE LA TORRE, CARLOS  
Address: 9401 SW 67TH ST  
City-St-Zip: MIAMI, FL 33173

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MCRAE B JOHNSTON

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date