

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L93000000157

FILED
Jun 16, 2004
Secretary of State

Entity Name: AMERICAN SOUTHERN FINANCIAL GROUP, L.C.

Current Principal Place of Business:

1 S.E. THIRD AVENUE
11TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

2121 SW 3RD AV
7TH FLOOR
MIAMI, FL 33129

Current Mailing Address:

1 S.E. THIRD AVENUE
11TH FLOOR
MIAMI, FL 33131

New Mailing Address:

2121 SW 3RD AV
7TH FLOOR
MIAMI, FL 33129

FEI Number: 65-0410298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDLANDER & ASSOCIATES, INC.
1 S.E. THIRD AVENUE
SUITE 1101
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

FRIEDLANDER & ASSOCIATES, INC.
2121 SW 3RD AV
5TH FL
MIAMI, FL 33129 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: TIMOTHY PAPPAS

06/16/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: AMERICAN SOUTHERN MO. RTGAGE CORPORA T ION
Address: 1 S.E. THIRD AVE., 11TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: THE KEYES COMPANY,
Address: 1 S.E. THIRD AVE., 11TH FLOOR
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIMOTHY PAPPAS

VP

06/16/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date