

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000749

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** ASSOCIATES HOUSING FINANCE, LLC

**Current Principal Place of Business:**

300 ST. PAUL PLACE  
BALTIMORE, MD 21202 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 30509  
TAX & REPORTING  
TAMPA, FL 33631 US

**New Mailing Address:**

**FEI Number:** 75-2731850

**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

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: FETNER, ROBERT  
Address: 4000 REGENT BLVD  
City-St-Zip: IRVING, TX 75063

Title: S  
Name: DAVIS, LINDA S  
Address: 300 ST PAUL PL  
City-St-Zip: BALTIMORE, MD 21202

Title: VP  
Name: DAVIS, LINDA S  
Address: 300 ST. PAUL PLACE  
City-St-Zip: BALTIMORE, MD 21202

Title: AS  
Name: HOFFMAN, LISA  
Address: 3800 CITIGROUP CENTER DRIVE F1-12  
City-St-Zip: TAMPA, FL 33610

Title: T  
Name: VERDESCHI, MICHAEL  
Address: 153 CITIGROUP CENTER  
City-St-Zip: NEW YORK, NY 10022

I hereby 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: LISA A. HOFFMAN

AS

04/07/2010

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