

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005393

FILED
Apr 26, 2006
Secretary of State

Entity Name: ASSOCIATION OF FINANCIAL HEALTH COUNSELORS CORPORATION

Current Principal Place of Business:

322 3RD AVENUE
INDIALANTIC, FL 32903

New Principal Place of Business:

209 6TH AVENUE
INDIALANTIC, FL 32903

Current Mailing Address:

322 3RD AVENUE
INDIALANTIC, FL 32903

New Mailing Address:

209 6TH AVENUE
INDIALANTIC, FL 32903

FEI Number: 51-0546027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIELLO, HEATHER
322 3RD AVENUE
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

AIELLO, HEATHER
209 6TH AVENUE
INDIALANTIC, FL 32903 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:

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AIELLO, HEATHER
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: AIELLO, JOHN
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: EVANS, AMANDA
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: BRADBURY, KELLY
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: LYMAN, IV, ARTHUR R
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: MINER, NOEL
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AIELLO, HEATHER M.S.
Address: 209 6TH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Change () Addition
Name: AIELLO, JOHN M.S.
Address: 209 6TH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Change () Addition
Name: EVANS, AMANDA PHD
Address: 209 6TH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Change () Addition
Name: LESLIE, MCELHINNEY B.S.
Address: 105 S RIVERSIDE DR, #154
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Change () Addition
Name: LYMAN, IV, ARTHUR R LT COL
Address: 6188 GEORGETOWN RD
City-St-Zip: BROAD RUN, VA 20137

Title: D (X) Change () Addition
Name: MINER, NOEL M.S.
Address: 328 LEEWARD AVE
City-St-Zip: JUPITER AVE, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HEATHER AIELLO

D

04/26/2006

Electronic Signature of Signing Officer or Director

Date