

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111091

FILED
Jan 12, 2004
Secretary of State

Entity Name: AMERICAN HOME LENDERS INC.

Current Principal Place of Business:

8751 W BROWARD BLVD
201
PLANTATION, FL 33324

New Principal Place of Business:

8751 W BROWARD BLVD
207
PLANTATION, FL 33324

Current Mailing Address:

8751 W BROWARD BLVD
201
PLANTATION, FL 33324

New Mailing Address:

8751 W BROWARD BLVD
207
PLANTATION, FL 33324

FEI Number: 01-0560496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNSTEIN, CLIFFORD
8751 W BROWARD BLVD #201
PLANTATION, FL 33324

Name and Address of New Registered Agent:

BERNSTEIN, CLIFFORD
8751 W BROWARD BLVD #207
PLANTATION, FL 33324

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: _____

01/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOFFMAN, SUSAN A
Address: 19209 SKYRIDGE CIRCLE
City-St-Zip: BOCA RATON, FL 33498

Title: MGRD () Delete
Name: BERNSTEIN, CLIFFORD
Address: 8751 W BROWARD BLVD #201
City-St-Zip: PLANTATION, FL 33498

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFMAN, SUSAN A
Address: 8751 W. BROWARD BLVD #207
City-St-Zip: PLANTATION, FL 33324

Title: MGRD (X) Change () Addition
Name: BERNSTEIN, CLIFFORD
Address: 8751 W BROWARD BLVD #207
City-St-Zip: PLANTATION, FL 33498

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUSAN HOFFMAN

P

01/12/2004

Electronic Signature of Signing Officer or Director

Date