2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000004018

Entity Name: AFFORDABLE LENDING SOURCE CORP

FILED May 06, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

1225 WEST BEAVER STREET STE 124 1225 WEST BEAVER STREET JACKSONVILLE, FL 32204

STE 124

JACKSONVILLE, FL 32204

Current Mailing Address: New Mailing Address:

818 MAGIC COVE LANE JACKSONVILLE, FL 32218

FEI Number: 26-0007899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TERRY, MONIQUE TERRY, MONIQUE L 818 MAGIC COVE LANE 818 MAGIC COVE LANE JACKSONVILLE, FL 32218 JACKSONVILLE, FL 32218 US 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: MONIQUE L TERRY 05/06/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete () Change () Addition

TERRY, MONIQUE L Name: Name: 818 MAGIC COVE LANE Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip:

Title: Title: () Delete (X) Change () Addition SUTTON, JOYCE E Name: Name: EADY, RICHARD I

9551 EVESHAM ROAD 11815 HIGH PLAINS DRIVE E. Address: Address: JACKSONVILLE, FL 32208 JACKSONVILLE, FL 32218 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

SUTTON, TARA V Name: SUTTON, TARA V Name: 11780 BISCAYNE BLVD. 8486 RAMPART ROAD Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 City-St-Zip: JACKSONVILLE, FL 32244 US

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: MONIQUE L. TERRY CEO 05/06/2005