

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000079068

FILED
Jun 13, 2006
Secretary of State

Entity Name: AMERICAN FINANCIAL HOLDING CO, INC.

Current Principal Place of Business:

6704 HULDA DRIVE
FORT PIERCE, FL 34951

New Principal Place of Business:

2025 OLD DIXIE HWY, S.W.
VERO BEACH, FL 32962

Current Mailing Address:

6704 HULDA DRIVE
FORT PIERCE, FL 34951

New Mailing Address:

2025 OLD DIXIE HWY, S.W.
VERO BEACH, FL 32962

FEI Number: 74-3040166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIMMS, LARRY W
6704 HULDA DRIVE
FORT PIERCE, FL 34951 US

Name and Address of New Registered Agent:

TIMMS, LARRY W
2025 OLD DIXIE HWY
VERO BEACH, FL 32962 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: LARRY W. TIMMS

06/13/2006

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:

Title: P () Delete
Name: TIMMS, LARRY W
Address: 6704 HULDA DR
City-St-Zip: FORT PIERCE, FL 34951

Title: V () Delete
Name: TIMMS, LAURA
Address: 1219 E 3RD ST #8
City-St-Zip: LONG BEACH, CA 90802

Title: V () Delete
Name: TIMMS, ANIESKA
Address: 1219 E 3RD ST #8
City-St-Zip: LONG BEACH, CA 90802

Title: V () Delete
Name: TIMMS, ERIKA
Address: 2025 OLD DIXIE HWY SW
City-St-Zip: VERO BEACH, FL 32962

Title: V () Delete
Name: TIMMS, LOURDES I
Address: 2025 OLD DIXIE HWY SW
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TIMMS, LARRY W
Address: 2025 OLD DIXIE HWY, S.W.
City-St-Zip: VERO BEACH, FL 32962

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: LARRY W. TIMMS

MR.

06/13/2006

Electronic Signature of Signing Officer or Director

Date