

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000110319

Entity Name: AMERICAN LIBERTY FINANCIAL, INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

100 E LINTON BLVD #500B
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

100 E LINTON BLVD #500B
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 01-0799520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPITAL PROPERTIES & INVESTMENTS, LLC
100 E LINTON BLVD #500B
DELRAY BEACH, FL 33483 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOMBARDO, JAMES
Address: 100 E LINTON BLVD #500B
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: D (X) Delete
Name: FULLER, MAC
Address: 100 E LINTON BLVD, #500B
City-St-Zip: DELRAY BEACH, FL 33483 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SORRELLS, ELAINE
Address: 100 E LINTON BLVD #500B
City-St-Zip: DELRAY BEACH, FL 33483 US

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 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: ELAINE SORRELLS

PRES

01/05/2005

Electronic Signature of Signing Officer or Director

Date