

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000063854

Entity Name: AA HOME SAVERS & MORTGAGES, INC

FILED
Aug 11, 2006
Secretary of State

Current Principal Place of Business:

3210 AUDUBON CT
TARPON SPRINGS, FL 34688

New Principal Place of Business:

8510 OLD CR 54
NEW PORT RICHEY, FL 34653

Current Mailing Address:

3210 AUDUBON CT
TARPON SPRINGS, FL 34688

New Mailing Address:

8510 OLD CR 54
NEW PORT RICHEY, FL 34653

FEI Number: 26-0116471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, AARON
3210 AUDUBON CT
TARPON SPRINGS, FL 34688 US

Name and Address of New Registered Agent:

ALLEN, AARON
8510 OLD CR 54
NEW PORT RICHEY, FL 34653 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: AARON ALLEN

08/11/2006

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: ALLEN, AARON
Address: 3210 AUDUBON CT
City-St-Zip: TARPON SPRINGS, FL 34688

Title: V (X) Delete
Name: BUTTA, ANTHONY
Address: 3210 AUDUBON CT
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALLEN, AARON
Address: 8510 OLD CR 54
City-St-Zip: NEW PORT RICHEY, FL 34653

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: AARON ALLEN

P

08/11/2006

Electronic Signature of Signing Officer or Director

Date