2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# P05000162646

Entity Name: AMERICAN RESIDENTIAL FINANCIAL, SERVICES CORP.

Current Principal Place of Business:

8031 NW 20 CT
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

PO BOX 130125
SUNRISE, FL 33313

New Mailing Address:

PO BOX 25578
TAMARAC, FL 33320

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLEURY, ELSIE
8031 NW 20 CT
SUNRISE, FL 33322 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

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: D ( ) Delete
Name: FLEURY, ELSIE
Address: 8031 NW 20 CT
City-St-Zip: SUNRISE, FL 33322

Title: S ( ) Delete
Name: MARCELIN, GLADYS
Address: 8031 NW 20 CT
City-St-Zip: SUNRISE, FL 33322

Title: T ( ) Delete
Name: FERGILE, GUERDA P
Address: 8031 NW 20 CT
City-St-Zip: SUNRISE, FL 33322

Title: S (X) Delete
Name: JOSEPH, FENELON
Address: 8031 NW 20 CT
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ELSIE FLEURY D 05/01/2009

Electronic Signature of Signing Officer or Director Date