

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010982

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: AFFORDABLE VENTURES, INC.

## Current Principal Place of Business:

9473 WALNUT CREST DRIVE  
ORLANDO, FL 32832

## New Principal Place of Business:

6220 S. ORANGE BLOSSOM TRAIL  
SUITE 194  
ORLANDO, FL 32809

## Current Mailing Address:

9473 WALNUT CREST DRIVE  
ORLANDO, FL 32832

## New Mailing Address:

6220 S. ORANGE BLOSSOM TRAIL  
SUITE 194  
ORLANDO, FL 32809

FEI Number: 20-4187418

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

METZLER, BRENT P  
420 S. ORANGE AVENUE  
SUITE 500  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

METZLER, BRENT P  
11406 WESTON POINTE DRIVE PLACE  
BRANDON, FL 33511 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: BRENT METZLER

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: COCHRAN, GARY J  
Address: 9473 WALNUT CREST DRIVE  
City-St-Zip: ORLANDO, FL 32832

Title: S,T ( ) Delete  
Name: COCHRAN, JENNEFER R  
Address: 9473 WALNUT CREST DRIVE  
City-St-Zip: ORLANDO, FL 32832

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GARY COCHRAN

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date