2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000084198

Entity Name: AUTO LENDING SOLUTIONS, INC.

FILED Apr 25, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

C/O HERRERA, 1250 E HALLANDALE BCH C/O HERRERA, 1250 E HALLANDALE BCH

1004 402

HALLANDALE, FL 33009 US HALLANDALE, FL 33009 US

Current Mailing Address: New Mailing Address:

C/O HERRERA, 1250 E HALLANDALE BCH C/O HERRERA, 1250 E HALLANDALE BCH

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HALLANDALE, FL 33009 US HALLANDALE, FL 33009 US

FEI Number: 26-0581984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HERRERA, THOMAS R
1250 E HALLANDALE BCH BLVD
1004
HALLANDALE, FL 33009 US
HERRERA, THOMAS R
1250 E HALLANDALE BCH BLVD
402
HALLANDALE, FL 33009 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: 04/25/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

1004

Title:

() Delete Title: PD (X) Change () Addition

Name: CHAPMAN, LORENE L Name: CHAPMAN, LORENE L

Address: 1455 NW 69TH TERRACE Address: 1250 E HALLANDALE BCH BLVD #402

City-St-Zip: MARGATE, FL 33063 US City-St-Zip: HALLANDALE, FL 33009 US

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: CHAPMAN, MARTIN J Name: CHAPMAN, MARTIN J

Address: 1455 NW 69TH TERRACE Address: 1250 E HALLANDALE BCH BLVD #402

City-St-Zip: MARGATE, FL 33063 US City-St-Zip: HALLANDALE, FL 33009 US

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: MARTIN J CHAPMAN VPD 04/25/2009