

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000017246

Entity Name: AFFORDABLE/SOUTHFORK, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

340 ROYAL POINCIANA WAY #305
PALM BEACH, FL 33480

New Principal Place of Business:

340 ROYAL POINCIANA WAY, SUITE 305
PALM BEACH, FL 33480

Current Mailing Address:

340 ROYAL POINCIANA WAY #305
PALM BEACH, FL 33480

New Mailing Address:

340 ROYAL POINCIANA WAY, SUITE 305
PALM BEACH, FL 33480

FEI Number: 59-3439919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENKINS, JAMES C
340 ROYAL POINCIANA WAY #305
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

JENKINS, JAMES C
340 ROYAL POINCIANA WAY, SUITE 305
PALM BEACH, FL 33480 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:

04/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STRAKA, CHRISTOPHER J
Address: 514 JEFFERSON AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VP () Delete
Name: JENKINS, JAMES C
Address: 340 ROYAL POINCIANA WAY #305
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: STRAKA, CHRISTOPHER J
Address: 514 JEFFERSON AVENUE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VP (X) Change () Addition
Name: JENKINS, JAMES C
Address: 340 ROYAL POINCIANA WAY, SUITE 305
City-St-Zip: PALM BEACH, FL 33480

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: SHAWN HORWITZ

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date