

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 115676

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: MUTUAL FINANCE COMPANY

## Current Principal Place of Business:

7203 N. FLORIDA AVE  
P. O. BOX 172127  
TAMPA, FL 33604 US

## New Principal Place of Business:

7203 N. FLORIDA AVE  
TAMPA, FL 33604 US

## Current Mailing Address:

P.O. BOX 127127  
P. O. BOX 172127  
TAMPA, FL 338720127 US

## New Mailing Address:

7203 N. FLORIDA AVE  
TAMPA, FL 33604 US

FEI Number: 59-0371510

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POTTS, DAVID C  
7203 N. FLORIDA AVE  
TAMPA, FL 33604 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: POTTS, JOE A,  
Address: 306 E TYLER  
City-St-Zip: TAMPA, FL

Title: PTD ( ) Delete  
Name: POTTS, DAVID C  
Address: 7203 N. FLORIDA AVE  
City-St-Zip: TAMPA, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: POTTS, JOE A,  
Address: 7203 N. FLORIDA  
City-St-Zip: TAMPA, FL 33604 HI

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: DAVID POTTS

PRES

03/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date