

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000856

FILED
Jan 14, 2005
Secretary of State

Entity Name: MONEYLINE LENDING SERVICES, INC.

Current Principal Place of Business:

15420 LAGUNA CANYON RD.
SUITE 100
IRVINE, CA 92618

New Principal Place of Business:

Current Mailing Address:

15420 LAGUNA CANYON RD.
SUITE 100
IRVINE, CA 92618

New Mailing Address:

FEI Number: 33-0822649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 E PARK AVENUE
TALLAHASSEE, FL 32301 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: P () Delete
Name: GENTRY, EVAN
Address: 16 SONGBIRD
City-St-Zip: TRABUCO CYN, CA 92679

Title: VS () Delete
Name: WOODS, TAYLOR
Address: 112 CALLE BELLA LOMA
City-St-Zip: SAN CLEMENTE, CA 92672

Title: VS () Delete
Name: BARBER, BRADLEY
Address: 24962 VIA PORTOLA
City-St-Zip: LAGUNA NIGUEL, CA 92677

Title: CFOD () Delete
Name: BELLISTON, J RICHARD
Address: 12 GRAY STONE WAY
City-St-Zip: LAGUNA NIGUEL, CA 92677

Title: D () Delete
Name: GENTRY, EVAN J
Address: 15421 LAGUNA CANYON ROAD
City-St-Zip: IRVINE, CA 92618

Title: D () Delete
Name: BROOKS, JAMES C
Address: 12 STRAWBERRY FARMS RD.
City-St-Zip: IRVINE, CA 92612

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
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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 for the exemption stated in Section 119.07(3)(i), 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: EVAN GENTRY

Electronic Signature of Signing Officer or Director

EXEC

01/14/2005

_____ Date