## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000003195

City-St-Zip:

FILED Jan 04, 2005 Secretary of State

Entity Name: LOAN AMERICA, INC. **Current Principal Place of Business: New Principal Place of Business:** 9000 CENTRAL PARK SUITE 500 ATLANTA, GA 30328 **New Mailing Address: Current Mailing Address:** 9000 CENTRAL PARK SUITE 500 ATLANTA, GA 30328 FEI Number: 58-2493831 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete Title: (X) Change ( ) Addition Name: WOLFORT, MATHEW Name: BERTE, MICHAEL R 9000 CENTRAL PARK W STE 500 9000 CENTRAL PARK W STE 500 Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: ATLANTA, GA 30328 PRES Title: Title: () Delete () Change () Addition Name: BERTE, MICHAEL R Name: 9000 CENTRAL PARK W STE 500 Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: Title: FVP () Delete () Change () Addition DABBS, PAMELA Name: Name: 9000 CENTRAL PARK W STE 500 Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: CFO () Delete Title: () Change () Addition ROBERT, HENDERSON Name: Name: Address: 9000 CENTRA; L PARK WEST STE 500 Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete Name: Name: MERIWEATHER, ROBERT Address: 9000 CENTRAL PARK WEST STE 500 Address:

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.

City-St-Zip:

ATLANTA, GA 30328

SIGNATURE: PAMELA DABBS **EVP** 01/04/2005