

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F04000000221

**FILED**  
**Sep 07, 2005**  
**Secretary of State**

**Entity Name:** ADVANTAGE ASSET RECOVERY, INC.

**Current Principal Place of Business:**

410 TWITCHELL RD  
DOTHAN, AL 36303

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1129  
DOTHAN, AL 36302

**New Mailing Address:**

**FEI Number:** 20-0164374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARTY, LANE  
4296 HWY 273  
GRACEVILLE, FL 32440 US

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

TERRY, WHITE  
4296 HWY 273  
GRACEVILLE, FL 32440 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: TERRY WHITE

09/07/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: SMITH, TODD  
Address: 2904 MURPHY MILL RD  
City-St-Zip: DOTHAN, AL 36303

Title: VP ( ) Delete  
Name: SMITH, DAN  
Address: 1502 MONTCLIFF DR  
City-St-Zip: DOTHAN, AL 36303

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: TODD SMITH

P

09/07/2005

Electronic Signature of Signing Officer or Director

Date