

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002315

FILED
Jun 29, 2005
Secretary of State

Entity Name: ANDERSON LENDING GROUP, INC.

Current Principal Place of Business:

267 HWY 74 NORTH
SUITE 5
PEACHTREE CITY, GA 30269

Current Mailing Address:

267 HWY 74 NORTH
SUITE 5
PEACHTREE CITY, GA 30269

New Principal Place of Business:

401 WESTPARK COURT
SUITE 200
PEACHTREE CITY, GA 30269

New Mailing Address:

401 WESTPARK COURT
SUITE 200
PEACHTREE CITY, GA 30269

FEI Number: 02-0570637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, LAWRENCE C
2863 WHISPER BAY BLVD.
GULF BREEZE, FL 32563 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: ANDERSON, BRIAN A
Address: 267 HWY 74 NORTH
City-St-Zip: PEACHTREE CITY, GA 30269

Title: WV () Delete
Name: ANDERSON, EMILY W
Address: 267 HWY 74 NORTH
City-St-Zip: PEACHTREE CITY, GA 30269

Title: D () Delete
Name: ANDERSON, LAWRENCE C
Address: 2863 SHISPER BAY BLVD.
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: ANDERSON, BRIAN A
Address: 267 HWY 74 NORTH
City-St-Zip: PEACHTREE CITY, GA 30269

Title: CP (X) Change () Addition
Name: ANDERSON, EMILY W
Address: 267 HWY 74 NORTH
City-St-Zip: PEACHTREE CITY, GA 30269

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: BRIAN ANDERSON

VP

06/29/2005

Electronic Signature of Signing Officer or Director

Date