

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003331

Entity Name: EQUIMAX LENDING, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

3521 LAKE AVENUE, STE. 5
FORT WAYNE, IN 46805

New Principal Place of Business:

3521 LAKE AVENUE
5
FORT WAYNE, IN 46805

Current Mailing Address:

3521 LAKE AVENUE, STE. 5
FORT WAYNE, IN 46805

New Mailing Address:

3521 LAKE AVENUE
5
FORT WAYNE, IN 46805

FEI Number: 30-0210597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRAZZO, MARK
430 COVE TOWER DRIVE, #303
NAPLES, FL 34110 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: PERRY, THOMAS W
Address: 3211 BRILL ROAD
City-St-Zip: INDIANAPOLIS, IN 46227

Title: VP () Delete
Name: ROY, STEVEN M
Address: 525 MISTY MORNING DRIVE
City-St-Zip: FLUSHING, MI 48433

Title: S () Delete
Name: NGUYEN, YENLINH T
Address: 407 SUNRISE COURT
City-St-Zip: FORT WAYNE, IN 46825

Title: T () Delete
Name: JONES, KELLY M
Address: 4519 DENALI COVE
City-St-Zip: FORT WAYNE, IN 46845

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
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: YENLINH T NGUYEN

S

01/04/2005

Electronic Signature of Signing Officer or Director

Date