

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H41799

FILED
Apr 29, 2005
Secretary of State

Entity Name: ACTION PAWNBROKERS OF KISSIMMEE, INC.

Current Principal Place of Business:

C/O LANIERS ANTIQUES
108 BROADWAY
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

C/O LANIERS ANTIQUES
108 BROADWAY
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 59-2471660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANIER,, THOMAS F DIR.
C/O LANIERS ANTIQUES
108 BROADWAY
KISSIMMEE, FL 34741 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: VD () Delete
Name: MITCHELL, ANGELA LANIER
Address: 1575 STARFISH ST.
City-St-Zip: KISSIMMEE, FL 34744

Title: VD () Delete
Name: MITCHELL, RICHARD CHARLE
Address: 1575 STARFISH ST.
City-St-Zip: KISSIMMEE, FL 34744

Title: D () Delete
Name: LANIER, THOMAS F.,
Address: 1634 STARFISH STREET
City-St-Zip: KISSIMMEE, FL 34744

Title: PD () Delete
Name: LANIER, SHARON C.
Address: 1634 STARFISH CT
City-St-Zip: KISSIMMEE, FL 34744

Title: STDC () Delete
Name: LANIER, JEREMY THOMAS
Address: 1634 STARFISH ST
City-St-Zip: KISSIMMEE, FL 34744

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:

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: THOMAS F. LANIER

DIR.

04/29/2005

Electronic Signature of Signing Officer or Director

Date