

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # M07675

1. Entity Name

A. J. SIDE MORTGAGE AND TRUST COMPANY, INC.



FILED

2005 JUL -5 PM 2:10

Principal Place of Business

510 PENN AVENUE  
BRONSON FL 32621  
US

Mailing Address

P.O. BOX 1540  
BRONSON FL 32621  
US

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
418185 90028 033 150-00



1st MOORE CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2469071

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIDE, A J  
510 PENN SYLVANIA AVENUE  
BRONSON FL 32621

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when restate)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing \$5.00 May  
Trust Fund Contribution. ☐ Added to Fee:

10. OFFICERS AND DIRECTORS

TITLE CPD  
NAME SIDE, A J  
STREET ADDRESS 510 PENNSYLVANIA AVENUE  
CITY - ST - ZIP BRONSON FL 32621 ☐ Delete

TITLE ST  
NAME SNOW, GAIL S  
STREET ADDRESS 510 PENNSYLVANIA AVENUE  
CITY - ST - ZIP BRONSON FL 32621 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Add

TITLE ST  
NAME SANABRIA, S.D.  
STREET ADDRESS 510 PENNSYLVANIA AVE  
CITY - ST - ZIP BRONSON FL 32621 ☒ Change ☐ Add

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Add

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Add

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Add

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

A. J. Side CPD

A. J. Side 4/1/05 352 486 01

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