## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## 04-29-2005 90259 048 \*\*\*150.00 DOCUMENT # M76903 CHECK EXPRESS FLORIDA, INC. Principal Place of Business Mailing Address 14009798 1231 GREENWAY DRIVE **1231 GREENWAY DRIVE** STE. 800 STE. 600 IRVING, TX 75038 IRVING, TX 75038 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04042005 CR2E034 (10/03) Chg-P City & State City & State 4 FEI Number Applied For 59-2884144 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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 | 1 am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CEOD Delete TITLE ☐ Change ☐ Addition TITLE NAME NEUSTADT, DONALD NAME 1231 GREENWAY DR., SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP IRVING, TX 75038 CITY+ST+ZIP CEO LEVELDIP EVPD Change THLE □ Delete TITLE ☐ Addition SHIPOWITZ, JAY B NAME NAME 1231 GREENWAY DR., SUITE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP IRVING, TX 75038 CITY-ST-ZIP TITLE **PCFO** Delete THLE ☐ Change Addition NEUSTADI, DONALO H MAME NAME STREET ADDRESS 1231 GREENWAY DR., SUITE 600 STREET ADDRESS CITY-ST-ZIP IRVING, TX 75038 CITY-ST-ZIP Delete ☐ Change TITLE vcoo TITLE ☐ Addition NAME SHIPOWITZ, JAY B NAME 1231 GREENWAY DR STE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP IRVING, TX 75038 CITY-ST-ZIP VILFOITID VCFO ■ Addition ☐ Delete TITLE Change TITLE NAME MCCALMONT, WILLIAM S NAME 1231 GREENWAY DR STE 600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP IRVING, TX 75038 CITY-ST-ZIP Delete TITLE VPS TITLE Change T Addition whiter E. Excuss 1231 breenay Dr. Suite 620 BRISKEY, MICHAEL J NAME NAME STREET ADDRESS 1231 GREENWAY DR STE 600 STREET ADDRESS CITY-ST-ZIP **IRVING, TX 75038** CITY-ST-ZIP Irving . TK 15058

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 if changed, or on an attachment with an address, with all other like empowered.

ula Her Evans

ACOM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

**FILED** 

Apr 29, 2005 8:00 am Secretary of State

472-5055075