

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011001

FILED
Mar 17, 2004
Secretary of State**Entity Name:** NEIGHBORHOOD LENDING PARTNERS OF NORTH FLORIDA, INC.**Current Principal Place of Business:**2002 N LOIS AVE SUITE 150
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**2002 N LOIS AVE SUITE 150
TAMPA, FL 33607**New Mailing Address:****FEI Number:** 56-2435240**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ANDREW SERVICE CORPORATION OF FLORIDA
ONE TAMPA CITY CENTER
201 N FRANKLIN ST SUITE 2100
TAMPA, FL 33602 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

OFFICERS AND DIRECTORS:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D () Change (X) Addition
Name: CREAMER, EDDIE
Address: P.O. DRAWER 1690
City-St-Zip: ST. AUGUSTINE, FL 32085 USTitle: D () Change (X) Addition
Name: LOGSTON, JIM
Address: P.O. BOX 2578
City-St-Zip: JACKSONVILLE, FL 32203 USTitle: S/D () Change (X) Addition
Name: FRANKLAND, G. T
Address: 9715 GATE PARKWAY NORTH
City-St-Zip: JACKSONVILLE, FL 32246 USTitle: C/D () Change (X) Addition
Name: WILLIAMS, JOSEPH H
Address: P.O. BOX 179
City-St-Zip: JACKSONVILLE, FL 32201 USTitle: D () Change (X) Addition
Name: CANUP, ED
Address: 1301 METROPOLITAN BLVD
City-St-Zip: TALLAHASSEE, FL 32308 USTitle: P/D () Change (X) Addition
Name: REYES, DEBRA
Address: 4116 WEST MCKAY AVENUE
City-St-Zip: TAMPA, FL 33609 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA REYES

P/D

03/17/2004

Electronic Signature of Signing Officer or Director

Date

CARLOS RIVAS - VICE PRESIDENT
4622 CLOVERLAWN DR
TAMPA, FL 33624

KEVIN TATREAU - VICE PRESIDENT
1710 GEORGIA AVENUE NE
ST PETERSBURG, FL 33703

PAUL V. WOODWORTH - DIRECTOR
P.O. BOX 4418 MAIL CODE 243
ATLANTA, GA 30302

JEFFREY S. WATERS - DIRECTOR
5210 BELFORT ROAD SUITE 310
JACKSONVILLE, FL 32256

REID SIDES - DIRECTOR
822 A1A NORTH SUITE 100
PONTE VERDE, FL 32082

PAUL V. WOODWORTH - DIRECTOR
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