2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

DOCUMENT# N05000006399

Entity Name: FINANCIAL FLORIDA OPERATIONS, INC.

Current Principal Place of Business:

1 TAMPA CITY CENTER SUITE 2760
TAMPA, FL 336025816

New Principal Place of Business:

Current Mailing Address:

1 TAMPA CITY CENTER SUITE 2760
TAMPA, FL 336025816

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUCKER/HALL INC
1 TAMPA CITY CENTER SUITE 2760
TAMPA, FL 336025816 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: D ( ) Delete
Name: COHEN, IRVING
Address: 5002 W WATERS AVE
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: HAKIM, GHASSAN
Address: 100 FOUNTAIN PARKWAY N
City-St-Zip: ST PETERSBURG, FL 33716

Title: D ( ) Delete
Name: LEWIS, PETER
Address: 1 TAMPA CITY CENTER SUITE 2760
City-St-Zip: TAMPA, FL 336025816

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: LEWIS, PETER
Address: 5002 W WATERS AVE
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JUSTIN CONRAD RA 04/12/2006

Electronic Signature of Signing Officer or Director — Date