2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2005
Secretary of State

DOCUMENT# P00000063788

Entity Name: BEACH MORTGAGE OF THE TREASURE COAST, INC.

Current Principal Place of Business:

1390 SW CLAIFORNIA BLVD
PORT ST LUCIE, FL 34952

New Principal Place of Business:

3961 SW PORT ST. LUCIE BLVD #117
PORT ST LUCIE, FL 34953

Current Mailing Address:

1390 SW CLAIFORNIA BLVD
PORT ST LUCIE, FL 34952

New Mailing Address:

3961 SW PORT ST. LUCIE BLVD #117
PORT ST LUCIE, FL 34953

FEI Number: 65-1018276 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLLIS, GEORGE M
729 SOUTH FEDERAL HWY STE 104
STUART, FL 34994 US

Name and Address of New Registered Agent:

POLLIS, ELIZABETH
3961 SW PORT ST. LUCIE BLVD #117
PORT ST. LUCIE, FL 34953 US

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: ELIZABETH POLLIS 05/16/2005
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: O ( ) Delete
Name: POLLIS, GEORGE M
Address: 1390 SW CALIFORNIA BLVD
City-St-Zip: PORT ST. LUCIE, FL 34953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition
Name: POLLIS, ELIZABETH
Address: 3961 SW PORT ST. LUCIE BLVD #117
City-St-Zip: PORT ST. LUCIE, FL 34953

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: ELIZABETH POLLIS PRES 05/16/2005
Electronic Signature of Signing Officer or Director Date