

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000075358

FILED
Jan 24, 2005
Secretary of State

Entity Name: ICONS MORTGAGE LENDERS CORPORATION

Current Principal Place of Business:

6365 TAFT STREET
STE 3002
HOLLYWOOD, FL 33024

New Principal Place of Business:

6365 TAFT ST.
HOLLYWOOD, FL 33024

Current Mailing Address:

6365 TAFT STREET
STE 3002
HOLLYWOOD, FL 33024

New Mailing Address:

6365 TAFT ST.
HOLLYWOOD, FL 33024

FEI Number: 65-1153392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYRD, BRIDGETT
6365 TAFT STREET
STE 3002
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

BYRD, B K
6365 TAFT ST.
HOLLYWOOD, FL 33024 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: BRIDGETTBYRD

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MCFARLANE-PARRIS, BRIDGETT A
Address: 6365 TAFT STREET, STE 3002
City-St-Zip: HOLLYWOOD, FL 33024

Title: S () Delete
Name: PARRS, TEDDY
Address: 6365 TAFT STREET SUITE 3002
City-St-Zip: HOLLYWOOD, FL 33024

Title: T () Delete
Name: ELLISON, M A
Address: 6365 TAFT STREET SUITE 3002
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: BROWN, ERROL A
Address: 6365 TAFT STREET SUITE 3002
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: PARRISMCFARLANE, BRIDGETT A M
Address: 6365 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: TS (X) Change () Addition
Name: PARRIS, T
Address: 6365 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: T (X) Change () Addition
Name: ELLISON, M A
Address: 6365 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33024

Title: MA (X) Change () Addition
Name: BROWN, E A
Address: 6365 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33024

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: BRIDGETTBYRD

T

01/24/2005

Electronic Signature of Signing Officer or Director

Date