

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079966

FILED
Jan 07, 2005
Secretary of State

Entity Name: LENDING HAND MORTGAGE, INC.

Current Principal Place of Business:

8019 N HIMES AVE STE 503
TAMPA, FL 33614

New Principal Place of Business:

3816 WEST LINEBAUGH AVE.
SUITE 304
TAMPA, FL 33618

Current Mailing Address:

% ERIC HALSOR
15747 BEREA DRIVE
ODESSA, FL 33556

New Mailing Address:

FEI Number: 59-3665996 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HALSOR, ERIC R
15747 BEREA DRIVE
ODESSA, FL 33556 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: HALSOR, ERIC R
Address: 11546 GLENMONT DR.
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: HALSOR, ERIC R
Address: 15747 BEREA DRIVE
City-St-Zip: ODESSA, FL 33556

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: ERIC HALSOR

PSTD

01/07/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date