


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000080325		
1. Entity Name THE LIBERAL LOAN COMPANY		
Principal Place of Business THE LIBERAL LOAN COMPANY 6838 PARK BLVD. PINELLAS PARK, FL 33781	Mailing Address 6838 PARK BLVD. PINELLAS PARK, FL 33781	



04012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3666463	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MARGARITIS, DOROTHY 4815 GULF BLVD, STE 216 ST PETE BEACH, FL 33708

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARGARITIS, DOROTHY 285 MONTE CRISTO BLVD. SAINT PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SUNCLAIR, JACQUELINE 5459 B LYNNLAKE DRIVE SOUTH SAINT PETERSBURG, FL 33712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WHEELER, DEBORAH 2016 38TH AVENUE NORTH SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/07/05-80039-022 158.75

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dorothy Margaritis* **DOROTHY MARGARITIS** 4/04/05 727-541-1614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #