

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000108756

Entity Name: SECURED FUTURE, INC.

FILED  
Jan 24, 2005  
Secretary of State

## Current Principal Place of Business:

200 KNUTH ROAD  
SUITE 212  
BOYNTON BEACH, FL 33436

## Current Mailing Address:

P.O. BOX 740905  
BOYNTON BEACH, FL 33474

## New Principal Place of Business:

200 KNUTH ROAD  
SUITE 244  
BOYNTON BEACH, FL 33436

## New Mailing Address:

FEI Number: 65-1061843      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHEN, JEROME  
7695 DOUBLETTON DRIVE  
DELRAY BEACH, FL 33446      US

## Name and Address of New Registered Agent:

COHEN, JEROME  
P.O. BOX 740905  
BOYNTON BEACH, FL 33474      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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/24/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: COHEN, JEROME  
Address: 7695 DOUBLETTON DRIVE  
City-St-Zip: DELRAY BEACH, FL 33446

Title: DVST ( ) Delete  
Name: HAGER, BETH  
Address: 110 YACHT CLUB WAY APT. 103  
City-St-Zip: HYPOLUXO, FL 33462

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: COHEN, JEROME  
Address: 8073 ROSSINI WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: DVST (X) Change ( ) Addition  
Name: COHEN, CAROL  
Address: 8073 ROSSINI WAY  
City-St-Zip: LAKE WORTH, FL 33467

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: JEROME COHEN

Electronic Signature of Signing Officer or Director

DP

01/24/2005

Date