

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000059556

FILED
Jul 28, 2004
Secretary of State

Entity Name: UNITED MUTUAL LENDING, INC.

Current Principal Place of Business:

1661 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406

New Principal Place of Business:

3138 NORTH OASIS DRIVE
BOYNTON BEACH, FL 33426

Current Mailing Address:

1661 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406

New Mailing Address:

3138 NORTH OASIS DRIVE
BOYNTON BEACH, FL 33426

FEI Number: 65-1125424

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STROTHMAN, NICOLE
2350 N 34 STREET NORTH
ST. PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

STROTHMAN, NICOLE ESQ
2350 N 34 STREET NORTH
ST. PETERSBURG, FL 33713 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: NICOLE STROTHMAN

07/28/2004

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: PD () Delete
Name: ANDREWS, CHARLES
Address: 1661 SOUTH CONGRESS AVENUE
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANDREWS, CHARLES B
Address: 3138 NORTH OASIS DRIVE
City-St-Zip: BOYNTON BEACH, FL 33426

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: CHARLES B. ANDREWS

PD

07/28/2004

Electronic Signature of Signing Officer or Director

Date