

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000079415

FILED  
Aug 05, 2004  
Secretary of State

**Entity Name:** ACCELERATED MORTGAGES OF SW,FL, INC.

**Current Principal Place of Business:**

917 SE 13TH AVE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

917 SE 13TH AVE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 65-1127067

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MANKE, ANGELICA  
1718 SE 28 ST  
CAPE CORAL, FL 33990 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

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:** MANKE, ANGELICA  
**Address:** 1718 SE 28 ST  
**City-St-Zip:** CAPE CORAL, FL 33990

**Title:** VSTD ( ) Delete  
**Name:** MANKE, BRIAN  
**Address:** 1718 SE 28 ST  
**City-St-Zip:** CAPE CORAL, FL 33990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

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:** ANGELICA MANKE

PD

08/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date