

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000047813

FILED
Jan 25, 2005
Secretary of State

Entity Name: ESTABLISHED MORTGAGE PROFESSIONALS, INC.

Current Principal Place of Business:

600 BYPASS DRIVE
SUITE 116
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

600 BYPASS DRIVE
SUITE 116
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: 04-3659531 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CAMPAGNOLI, NICHOLAS F PRESIDE
600 BYPASS DRIVE,
SUITE 116
CLEARWATER, FL 33764 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: PSD () Delete
Name: CAMPAGNOLI, NICHALAS F
Address: 205 21ST AVENUE
City-St-Zip: INDIAN ROCKS BEACH, FL 33764

Title: VTD () Delete
Name: SAKADALES, JULIA R
Address: 2109 SANDPIPER POINTE CT
City-St-Zip: TARPON SPRINGS, FL 34689

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: CAMPAGNOLI, NICHALAS F
Address: 15106 ARBOR HOLLOW DRIVE
City-St-Zip: ODESSA, FL 33556

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: NICHOLAS F. CAMPAGNOLI

PSD

01/25/2005

Electronic Signature of Signing Officer or Director

_____ Date