

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049322

FILED
May 01, 2005
Secretary of State

Entity Name: HELP HOME LOANS COMPANY

Current Principal Place of Business:

1286 W BAY DR
LARGO, FL 33770

New Principal Place of Business:

801 WEST BAY DRIVE
417
LARGO, FL 33770

Current Mailing Address:

1286 W BAY DR
LARGO, FL 33770

New Mailing Address:

801 WEST BAY DRIVE
417
LARGO, FL 33770

FEI Number: 68-0503164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZPATRICK, EUGENE E
1286 W BAY DR
LARGO, FL 33770 US

Name and Address of New Registered Agent:

VAN ARSDALL, ELEANOR F
801 WEST BAY DRIVE
417
LARGO, FL 33770 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: ELEANOR F VAN ARSDALL

05/01/2005

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: FITZPATRICK, EUGENE
Address: 1286 W BAY DR
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: JULY, ELEANOR
Address: 1286 W BAY DR
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VAN ARSDALL, ELEANOR F
Address: 801 WEST BAY DRIVE SUITE 417
City-St-Zip: LARGO, FL 33770

Title: D (X) Change () Addition
Name: JULY, ELEANOR
Address: 801 WEST BAY DRIVE SUITE 417
City-St-Zip: LARGO, FL 33770

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: ELEANOR F VAN ARSDALL

PRES

05/01/2005

Electronic Signature of Signing Officer or Director

Date