

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063343

Entity Name: AMCASH SERVICES, INC.

FILED  
Jan 12, 2004  
Secretary of State

## Current Principal Place of Business:

4927 COACH LANE  
NAPLES, FL 34114

## New Principal Place of Business:

## Current Mailing Address:

4927 COACH LANE  
NAPLES, FL 34114

## New Mailing Address:

FEI Number: 04-3689328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCORMICK, STEPHEN F  
4927 COACH LANE  
NAPLES, FL 34114 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: D ( ) Delete  
Name: MCCORMICK, STEPHEN F  
Address: 4927 COACH LANE  
City-St-Zip: NAPLES, FL 34114

Title: P ( ) Delete  
Name: PUTNATI, LOUISIE  
Address: 3011 KENMORE RD.  
City-St-Zip: RICHMOND, VA 23225

Title: D ( ) Delete  
Name: CORMICK, JOHN  
Address: 475 IOX HILL DRIVE  
City-St-Zip: AURORA, OH 44202

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: PUTNAM, LOUISE  
Address: 14421 NEWGATE RD.  
City-St-Zip: MIDLOTHIAN, VA 23113

Title: D (X) Change ( ) Addition  
Name: MCCORMICK, JOHN  
Address: 475 FOX HILL DRIVE  
City-St-Zip: AURORA, OH 44202

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: LOUISE M. PUTNAM

SECR

01/12/2004

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

\_\_\_\_\_  
Date