

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081580

Entity Name: FT. MYERS MORTGAGE, INC.

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

10501 SIX MILE CYPRESS PARKWAY
STE 103
FORT MYERS, FL 33912

Current Mailing Address:

10501 SIX MILE CYPRESS PKY
STE 103
FORT MYERS, FL 33912

New Principal Place of Business:

10501 SIX MILE CYPRESS PARKWAY
STE 105-C
FORT MYERS, FL 33912

New Mailing Address:

10471 SIX MILE CYPRESS PARKWAY
STE 407
FORT MYERS, FL 33912

FEI Number: 16-1620349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAN, J. DOUGLAS
8038 TIGER PALM WAY
FT. MYERS, FL 33912 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: P () Delete
Name: SLOAN, J. DOUGLAS II
Address: 8038 TIGER PALM WAY
City-St-Zip: FT. MYERS, FL 33912

Title: ST () Delete
Name: TIFFANY, HOOPER
Address: 9765 GLADIOLUS BULB LOOP
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: HOOPER-SLOAN, GENICE A
Address: 8038 TIGER PALM WAY
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: J. DOUGLAS SLOAN

P

04/22/2005

Electronic Signature of Signing Officer or Director

Date