

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088666

FILED
Feb 15, 2005
Secretary of State

Entity Name: PREMIER LENDING SOURCE, INC.

Current Principal Place of Business:

101 CENTURY 21 DRIVE
SUITE 210
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 351257
JACKSONVILLE, FL 32235

New Mailing Address:

101 CENTURE 21 DRIVE
SUITE 210
JACKSONVILLE, FL 32216

FEI Number: 02-0637832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PRES () Delete
Name: SMITH, ANITA M PRES
Address: 5205 LAKECREST DRIVE
City-St-Zip: SHAWNEE MISSION, KS 66218 US

Title: V.P. () Delete
Name: GARRISON, SONYA D V. PRES
Address: 12479 SUN PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SMITH, ANITA M PRES
Address: 1831 SUNCHASE COURT
City-St-Zip: JACKSONVILLE, FL 32246 US

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

Title: TREA () Change (X) Addition
Name: DAVENPORT, ANNE M TREASUR
Address: 6421 KADEN DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32277

Title: SEC () Change (X) Addition
Name: GARRISON, SONYA D SECRETA
Address: 12479 SUN PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32225

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: SONYA GARRISON

V.P.

02/15/2005

Electronic Signature of Signing Officer or Director

Date