

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089146

FILED
Apr 28, 2005
Secretary of State

Entity Name: ACCOUNTS MANAGEMENT ENHANCEMENT AGENCY, INC.

Current Principal Place of Business:

1400 VILLAGE SQ. BLVD., #226
TALLAHASSEE, FL 32312

New Principal Place of Business:

1400 VILLAGE SQ BLDV. #226
TALLAHASSEE, FL 32309

Current Mailing Address:

1400 VILLAGE SQ. BLVD., #226
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 27-0051529 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, BLOUNCHE K
3207-33 SHAMROCK E
TALLAHASSEE, FL 32209 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: BROWN, BLOUNCHE
Address: 3207B SHAMROCK E
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: BROWN, ALFRED
Address: 3207-33 SHAMROCK E
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: THOMAS, RICHARD
Address: 474 MAN-O-WAR CIR
City-St-Zip: PENSACOLA, FL 32523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, BLOUNCHE
Address: 3207B SHAMROCK E
City-St-Zip: TALLAHASSEE, FL 32309

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: BLOUNCHE BROWN

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date