

004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)


FILED
Mar 15, 2004 8:00 am
Secretary of State

02-18-2004 90004 048 ***150.00

66406000



MOORE CR2E034 (11/03)

DOCUMENT # P03000059226	
1. Entity Name LENDING CENTRAL INC.	

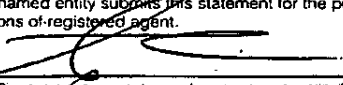
Principal Place of Business 2600 NE 36TH ST LIGHTHOUSE POINT FL 33064	Mailing Address 2600 NE 38TH ST LIGHTHOUSE POINT FL 33064
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2. Principal Place of Business 1500 NW 62nd St #405	3. Mailing Address 1500 NW 62nd St #405
Suite, Apt. #, etc. #405	Suite, Apt. #, etc. #405

City & State Fort Lauderdale FL	City & State Fort Lauderdale
Zip 33309	Country Broward
Zip 33309	Country Broward

6. Name and Address of Current Registered Agent HUNTER, JOYCE 2600 NE 36TH ST LIGHTHOUSE POINT FL 33064		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

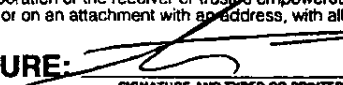
SIGNATURE  DATE **2/9/04**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D	<input type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HUNTER, JOYCE		NAME HUNTER, JOYCE	
STREET ADDRESS 2600 NE 36TH ST		STREET ADDRESS 2600 NE 36TH ST	
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064		CITY-ST-ZIP LIGHTHOUSE POINT FL 33064	
TITLE D	<input type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SCHNUR, STUART		NAME SCHNUR, STUART	
STREET ADDRESS 1170 HILLSBORO MILE #302		STREET ADDRESS 1170 HILLSBORO MILE #302	
CITY-ST-ZIP HILLSBORO BEACH FL 33062		CITY-ST-ZIP HILLSBORO BEACH FL 33062	
TITLE D	<input type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **2/9/04** DAYTIME PHONE # **954-202-2027**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR