

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

07-05-2005 90116 028 \*\*\*150.00  
P04000033789

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**50054623**



<b>DOCUMENT # P04000033789</b> 1. Entity Name <b>FINANCIAL ONE CORPORATION OF AMERICA</b>			
Principal Place of Business 736 - 6TH STREET WEST TIERRA VERDE, FL 33715		Mailing Address 736 - 6TH STREET WEST TIERRA VERDE, FL 33715	
2. Principal Place of Business <i>736 - 6th Street West</i> Suits, Apt. #, etc. 1		3. Mailing Address <i>SAME</i> Suits, Apt. #, etc.	
City & State <i>Tierra Verde, FL</i>		City & State	
Zip <i>33715</i>		Zip	
Country <i>USA</i>		Country	
4. FEI Number <i>43 - 205 3303</i>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>BAKER, BILLIE P</b> 736 - 6TH STREET WEST TIERRA VERDE, FL 33715		7. Name and Address of New Registered Agent Name <i>N/A</i> Street Address (P.O. Box Number is Not Acceptable)  City <i>FL</i> Zip Code	
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 <i>David Baker</i> DATE <i>07-01-05</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NUMBER FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.183(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PTD BAKER, CARLOS F 738 - 6TH STREET WEST TIERRA VERDE, FL 33715	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VSD BAKER, BILLIE P 736 - 6TH STREET WEST TIERRA VERDE, FL 33715	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD BAKER, DAVID M 3608 KING GEORGE DR. ORLANDO, FL 32835	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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: <i>David M. Baker</i>		DATE: <i>07-01-05</i>	
<small>PRINTED NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR</small>		<small>Daytime Phone #</small>	