# FILED Jul 27, 2005 8:00 am Secretary of State 07-27-2005 90047 015 \*\*\*150.00

## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P0400098101  1. Entity Name											
NADINE 8	3 AMERIS,	, P.A.		_							
Principal Place	e of Business	·	Mailing Address					<b>F</b> n			
2186 WEST ATLANTIC AVE			2186 WEST ATLANTIC AVE					<b>50</b> 1	0579	36	
DELRAY BEACH, FL 33445			DELRAY BEACH, FL 33445								
Principal Place of Business			3. Mailing Address								
Suite. Apt. #. etc			Suite, Apt #, etc			07012005	Chg-P	· CR2E034			
City & State			City & State			4. FÊI Nûmbe	20-1359	1335	Not	plied For Applicable	
Zio	D Country		Zip	Country		5. Certificate	of Status Desired		B.75 Addi		
	6. Name a	nd Address of Current	Registered Agent	Name	7. Name and	Address of New F	Registered Ag	ent			
AMERIS, NADINE 8 2186 WEST ATLANTIC AVE					Street Address (P O Box Number 15 Not Acceptable)						
DELRAY BEACH, FL 33445											
					City	City FL 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 Signature, typed or printed rights of registered against and little if applicable (NOTE Registered Agent against enquired when rendstating) DATE											
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the											
		FEE IS \$150.00 ember 7, 2005		5.00 May Be ided to Fees	corporation did	with 5. 507.1 I not receive	93(2)(b), the prior r	notice.			
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OF				
TITLE NAME	P AMERIS, N	ADINE R	Delate	HITU Nav	,				Change	Addition	
STREET ADDITESS	"				EET ADDRESS						
CITY-ST-7IP	DELRAY B	EACH, FL 33445	<u> </u>	CITY	-ST-ZIP						
THILE			☐ Delete	TITL NAM	ŀ				Change	Addition	
NAME STREET ADDRESS				- 1	EET ADDRESS						
CITA 21 TIB				CIL	·ST ZIP						
THE	1		☐ Delete	TET L	. )				Change	Additron	
NAME STREET ADDRESS					EET ADDRESS						
CITY ST ZIP	<u> </u>			CITY	/-S1-UP						
TITLE	1		Delete	TITL NAM	}				Change	□ Additon	
NAME STREET ADDRESS					EET ADDRESS						
CLTY-ST-ZIP				Car	r-st zip	·	<u></u>				
HILE			Detete	TILL	1				Change	☐ Addition	
STREET ADDRESS	1				EET ADDRESS						
CITY-ST-ZIP	<u> </u>			CIT	Y - ST - ZIP				<del></del>		
litte			☐ Delate	NAA					Change	Addition	
NAME STREET ADDRESS					EET ADDRESS						
UITY-ST ZIP					Y-SI-ZIP						
12. I hereby	certify that the	information supplied w	th this filing does not qualif	y for the ex	omption stated in S	Section 119 07(3)	(i), Florida Statutes	. Hurther certi	ly that the i	nformation or director	
of the col	a on ussireport reporation or the Lor on an alles	e receiver or trustee em charent will an address	powered to execute this re- i, with all other like empower	port as requ pred.	med by Chapter 6	07 Florida Statuti	es and that my nar	ne appears in	Block 10 o	r Block 11 if	
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 office as if made under each, that I am an officer or director of the corporation or the receiver of 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: SIGNATURE AND TYPED ON PHYSTED NAME OF SIGNING OFFICER ON DIRECTOR

Clate Chyume Phone

## ATTACHMENT

### 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000013800

Entity Name: AMERISFIRST MORTGAGE AND INVESTMENT INC.

Jan 28, 2005 Secretary of State

New Principal Place

2186 W. ATLANTIC AVE. DELRAY BEACH, FL 334454657 US

**Current Mailing Address:** 

New Mailing Address:

2186 W. ATLANTIC AVE DELRAY BEACH, FL 334454657 US

FEI Number: 65-0389802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

......

AMERIS, RENE D 2186 W. ATLANTIC AVE DELRAY BEACH, FL 334454657 US

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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:** 

( ) Change ( ) Addition

( ) Change ( ) Addition

Title:

( ) Delete

AMERIS, RENE D.

Name: Address

2420 S.W. 105TH TERRACE

City-St-Zip:

**DAVIE, FL 33324** 

Title:

VP

( ) Delete

Name:

BRICOURT-AMERIS, NADINE 2420 SW 105TH TERRACE

Address: City-St-Zip:

**DAVIE, FL 33324** 

Title: Name:

Address

City-St-Zip:

Title:

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: NADINE B AMERIS

VP

01/28/2005