

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101705

FILED  
Apr 20, 2005  
Secretary of State

Entity Name: TREASURE COAST HOME LOANS, INC.

## Current Principal Place of Business:

2667 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953

## New Principal Place of Business:

## Current Mailing Address:

10308 S. FEDERAL HWY.  
PORT ST. LUCIE, FL 34952

## New Mailing Address:

2667 SW PT. ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953

FEI Number: 43-2066723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHEVERS, SELMA  
2667 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953 US

## Name and Address of New Registered Agent:

SCHEVERS, KEVIN  
2667 SW PORT ST. LUCIE BLVD.  
PORT ST. LUCIE, FL 34953 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: KEVIN J. SCHEVERS

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SCHEVERS, KEVIN J  
Address: 1867 SW IMPORT DR.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP (X) Delete  
Name: SCHEVERS, SELMA  
Address: 1867 SW IMPORT DRIVE  
City-St-Zip: PORT ST. LUCIE, FL 34953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: KEVIN J. SCHEVERS

P

04/20/2005

Electronic Signature of Signing Officer or Director

Date