## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000151685

**Entity Name:** LOANS MADE EASY INC.

FILED Mar 07, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD. SAN MATEO, FL 32187

104

ORANGE PARK, FL 32065

**Current Mailing Address: New Mailing Address:** 

627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD. SAN MATEO, FL 32187

104

ORANGE PARK, FL 32065

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PASS, MADELINE G PASS, MADELINE G 627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD.

SAN MATEO, FL 32187

ORANGE PARK, FL 32065 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.

104

SIGNATURE: 03/07/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

PASS, MADELINE G PASS, MADELINE G Name: Name: 627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD. Address: Address: City-St-Zip: SAN MATEO, FL 32187 City-St-Zip: ORANGE PARK, FL 32065

VΡ Title: VΡ (X) Change ( ) Addition Title: () Delete

Name: PASS, MADELINE G Name: PASS, MADELINE G 627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD. Address: Address: SAN MATEO, FL 32187 ORANGE PARK, FL 32065 City-St-Zip: City-St-Zip:

Title: SECT Title: SECT (X) Change ( ) Addition ( ) Delete

PASS, MADELINE G PASS, MADELINE G Name: Name: 627 HIGHWAY 17 SOUTH 83 KNIGHT BOXX RD Address: Address: SAN MATEO, FL 32187 City-St-Zip: ORANGE PARK, FL 32065 City-St-Zip:

Title: TREA () Delete Title: TREA (X) Change ( ) Addition

PASS, MADELINE G PASS, MADELINE G Name: Name: Address: 627 HIGHWAY 17 SOUTH Address: 83 KNIGHT BOXX RD. City-St-Zip: SAN MATEO, FL 32187 City-St-Zip: ORANGE PARK, FL 32065

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: MADELINE G. PASS **PRES** 03/07/2005