

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000104237

FILED
May 21, 2008
Secretary of State**Entity Name:** HELIOS FINANCIAL CENTER INC.**Current Principal Place of Business:**4423 DEL PRADO BLVD
CAPE CORAL, FL 33904 US**New Principal Place of Business:**12599 BRANTLEY COMMONS COURT
FORT MYERS, FL 33907 US**Current Mailing Address:**430 SW 43RD STREET
CAPE CORAL, FL 33904 US**New Mailing Address:**12599 BRANTLEY COMMONS CT
FORT MYERS, FL 33907 US**FEI Number:** 20-3200839**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOSSERT, TROY A
4423 DEL PRADO BLVD
CAPE CORAL, FL 33904 US**Name and Address of New Registered Agent:**ST. AMAND, NIKKI
12599 BRANTLEY COMMONS CT
FORT MYERS, FL 33907 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: NIKK ST. AMAND

05/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: BOSSERT, NIKKI
Address: 4423 DEL PRADO BLVD
City-St-Zip: CAPE CORAL, FL 33990 US

Title: S () Delete
Name: FORREY, MERCEDES
Address: 4423 DEL PRADO BLVD
City-St-Zip: CAPE CORAL, FL 33990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: ST. AMAND, NIKKI
Address: 4423 DEL PRADO BLVD
City-St-Zip: CAPE CORAL, FL 33990 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NIKKI ST. AMAND

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05/21/2008

Electronic Signature of Signing Officer or Director

Date