## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 21, 2006 8:00 am Secretary of State

## DOCUMENT # P05000119360 01-25-2006 90022 039 \*\*\*150.00 FLORIDA MORTGAGE EDUCATION INSTITUTE, INC. Principal Place of Business Mailing Address 3155 LANDMARK DRIVE, #315 3155 LANDMARK DRIVE, #315 66001908 CLEARWATER FL 33761 CLEARWATER, FL 133761 !-2.14 was managed and the 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. F. etc. 01052008 CR2E034 (11/05) City & State City & State 4. FEI Numbe Applied For 20-339 1570 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BOWLES, WARREN E** 3155 LANDMARK DRIVE, #315 Street Address (P.O. Box Number is Not Acceptable) CLEARWATER, FL 33761 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered egent, or both, in the State of Florida, i am familiar with, and accept the obligations of registered agent. DATE \$5.00 May Be Added to Fees 9. Election Campaign Financing FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete m e Change Addition | BOWLES, WARREN E NAME MAME STREET ADDRESS 3155 LANDMARK DRIVE, #315 STREET ADDRESS CITY-ST-ZP CLEARWATER, FL 33761 CITY-ST-ZIP TILE MLE Odete ☐ Chance ☐ Addition NU. MALE STRETT ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZP TITLE TITLE ☐ Deleta ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DTLE TITLE Delete Change Addition NUME NUME STREET ADORESS STREET ADDRESS CTTY-ST-79 CITY-ST-ZP 🗆 Defete ME Crance Addition NAME STREET ADDRESS STREET ADDRESS CITY-53-7P DITY-ST-ZP TITLE O Deleta MILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS. STREET ADDRESS CITY-51-22P C114-21-28P 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, 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.

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ATTACHMENT (46001908

## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2006

FLORIDA MORTGAGE EDUCATION INSTITUTE, INC. 3155 LANDMARK DRIVE, #315 CLEARWATER, FL 33761

Subject: FLORIDA MORTGAGE EDUCATION INSTITUTE, INC.

Reference Number:

P05000119360

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm ANNUAL REPORTS SECTION