2013 FOR PROFIT CORPORATION ANNUAL REPORT

13 APR 30 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000125853

1. Entity Name
PREMIER MORTGAGE CONSULTANTS OF SOUTHWEST FLORIDA,INC

Principal Place of Business	Mailing Address
4829 CORONADO PKWY CAPE CORAL, FL 33904	4829 CORONADO PKWY CAPE CORAL, FL 33904

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

12042013 Chg-P CR2E034 (12/11)

4. FEI Number 20-3465195 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MIDNET, GLENN J JR
4829 CORONADO PKWY
CAPE CORAL, FL 33904

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
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] Glenn Midnet 12-4-13
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
Due by September 27, 2013

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MIDNET, GLENN J JR 4829 CORONADO PKWY CAPE CORAL, FL 33904	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000254535720 05/02/13--62465--007 **145.88
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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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Glenn Midnet 12-4-13 gmidnet@premiermortgageswfl.c
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE E-MAIL ADDRESS