

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000002925

FILED
Mar 14, 2008
Secretary of State

Entity Name: 1ST CHOICE LOAN PROCESSING INC

Current Principal Place of Business:

1802 18TH WAY
WEST PALM BEACH, FL 33407 US

New Principal Place of Business:

426 SW JEANNE AVE
PORT SAINT LUCIE, FL 34953 US

Current Mailing Address:

1802 18TH WAY
WEST PALM BEACH, FL 33407 US

New Mailing Address:

426 SW JEANNE AVE
PORT SAINT LUCIE, FL 34953 US

FEI Number: 20-8171731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PISANO, LARISA D
1802 18TH WAY
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

PISANO, LARISA D
426 SW JEANNE AVE
PORT SAINT 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: LARISA D. PISANO

03/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: PISANO, LARISA D
Address: 1802 18TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: S/D () Delete
Name: PISANO, MICHAEL
Address: 1119 GREEN PINE BLVD #A-2
City-St-Zip: WEST PALM BEACH, FL 33409 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: PISANO, LARISA D
Address: 426 SW JEANNE AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: S/D (X) Change () Addition
Name: PISANO, MICHAEL
Address: 426 SW JEANNE AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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: LARISA D. PISANO

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03/14/2008

Electronic Signature of Signing Officer or Director

Date