

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000004076

FILED  
Apr 07, 2008  
Secretary of State

Entity Name: EZ CHECK CASHING OF TAMPA, INC.

## Current Principal Place of Business:

8340 N DALEMABRY HWY  
TAMPA, FL 33614 US

## New Principal Place of Business:

## Current Mailing Address:

5500 BEE RIDGE ROAD  
SUITE 204  
SARASOTA, FL 34233 US

## New Mailing Address:

FEI Number: 59-3152824      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YOUNG, TERRI  
4178 ROBERTS POINT CIR  
SARASOTA, FL 34242 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: YOUNG, TERRI  
Address: 4178 ROBERTS POINT CIR  
City-St-Zip: SARASOTA, FL 34242

Title: VP ( ) Delete  
Name: POLLARD, GAIL  
Address: 8595 WOODBRIAR DRIVE  
City-St-Zip: SARASOTA, FL 34238

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: TERRI YOUNG

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04/07/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date