

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000005701

Entity Name: FAMILY FINANCE, INC.

FILED  
Apr 11, 2005  
Secretary of State

## Current Principal Place of Business:

13815 LAKE VILLAGE PLACE  
TAMPA, FL 33604 US

## New Principal Place of Business:

6201 N. NEBRASKA AVE.  
TAMPA, FL 33604 US

## Current Mailing Address:

PO BOX 9383  
TAMPA, FL 33674 US

## New Mailing Address:

FEI Number: 59-3153612      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAMER, NANCY  
6201 N. NEBRASKA AVE.  
TAMPA, FL 33604 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: T ( ) Delete  
Name: CRAMER, CINTHIA  
Address: 6201 N. NEBRASKA AVE  
City-St-Zip: TAMPA, FL 33604

Title: P ( ) Delete  
Name: CRAMER, TERRANCE JR  
Address: 6201 NEBRASKA AVE  
City-St-Zip: TAMPA, FL

Title: VP ( ) Delete  
Name: CRAMER, TERRANCE SR  
Address: 6201 N. NEBRASKA AVE.  
City-St-Zip: TAMPA, FL 33604

Title: VP ( ) Delete  
Name: BACKSTROM, RUSSELL  
Address: 6201 N. NEBRASKA AVE.  
City-St-Zip: TAMPA, FL 33604

Title: S ( ) Delete  
Name: BACKSTROM, CANDICE  
Address: 6201 N. NEBRASKA AVE.  
City-St-Zip: TAMPA, FL 33604

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 for the exemption stated in Section 119.07(3)(i), 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: RUSSELL BACKSTROM

VP

04/11/2005

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

\_\_\_\_\_  
Date