2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000007827

Entity Name: FIRST CAPITAL LENDING CORP.

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

3820 COLONIAL BLVD 3848 COLONIAL BLVD #104 FT MYERS FL 33912

#104 FT MYERS, FL 33912 US FT MYERS, FL 33912 US

Current Mailing Address: New Mailing Address:

#104 FT MYERS, FL 33912 US FT MYERS, FL 33912 US

FEI Number: 65-0384142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLOYD, EDWARD R
3820 COLONIAL BLVD
SUITE 104
FT MYERS, FL 33912
FT MYERS, FL 33912

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: EDWARD R FLOYD 04/14/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD () Delete Title: () Change () Addition

 Name:
 FLOYD, EDWARD R
 Name:

 Address:
 422 SEAWORTHY ROAD
 Address:

 City-St-Zip:
 FT MYERS, FL 33903
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 VINCENT, PATTI
 Name:

 Address:
 914 SE 23RD STREET
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33990
 City-St-Zip:

Title: DAV () Delete Title: DAV (X) Change () Addition

Name: STAHLHUT, BRAD Name: STAHLHUT, BRAD

Address: 13731 MARKHAM LN UNIT P-3 Address: 18160 OLD PELICAN BAY DRIVE City-St-Zip: FORT MYERS, FL 33919 City-St-Zip: FORT MYERS, FL 33931

Title: DAV () Delete Title: DAV (X) Change () Addition

 Name:
 KREJCI, TRACY
 Name:
 KREJCI - KELLY, TRACY

 Address:
 502 SW 33RD AVE
 Address:
 502 SW 33RD AVE

 City-St-Zip:
 CAPE CORAL, FL 33991
 City-St-Zip:
 CAPE CORAL, FL 33991

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: EDWARD R FLOYD PTSD 04/14/2004