

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000032541

FILED  
Mar 11, 2005  
Secretary of State

Entity Name: EMBASSY FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

1390 S DIXIE HWY  
SUITE 1310  
CORAL GABLES, FL 33146 US

## New Principal Place of Business:

666 GRAND AVE. #2900  
DES MOINES, IA 50309 US

## Current Mailing Address:

1390 S DIXIE HWY  
SUITE 1310  
CORAL GABLES, FL 33146 US

## New Mailing Address:

PO BOX 657  
DES MOINES, IA 503030657 US

FEI Number: 65-0669509

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: P ( ) Delete  
Name: NEITZEL, SCOTT  
Address: 1390 S DIXIE HWY, SUITE 1310  
City-St-Zip: CORAL GABLES, FL 33146

Title: ST ( ) Delete  
Name: SHUFFIELD, RONALD A  
Address: 1360 S DIXIE HWY, SUITE 1310  
City-St-Zip: CORAL GABLES, FL 33146

Title: DIR ( ) Delete  
Name: JOHNSON, GALEN  
Address: 6800 FRANCE AVE. S  
City-St-Zip: EDINA, MN 55435

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition  
Name: SHUFFIELD, RONALD A  
Address: 1360 S DIXIE HWY, SUITE 1310  
City-St-Zip: CORAL GABLES, FL 33146

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

Title: AS ( ) Change (X) Addition  
Name: LEIGHTON, PAUL J  
Address: 666 GRAND AVE. #2900  
City-St-Zip: DES MOINES, IA 50309

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: PAUL J. LEIGHTON

AS

03/11/2005

Electronic Signature of Signing Officer or Director

Date