2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 20, 2005 8:00 am Secretary of State 4/1 **DOCUMENT # P96000060083** 1. Entity Name 04-01-2005 90008 048 ***150.00 ADVANCE EQUITITES, INC. Principal Place of Business Mailing Address 835 S HWY 27 & 441 LADY LAKE FL 32159 US 835 S HWY 27 & 441 LADY LAKE FL 32159 US PPULLOZE 2. Principal Place of Business 3. Mailing Address Suite Apt # atc. Suite. Apt. #. etc. CR2E034 (10/04) Applied For City & State City & State 59-3391157 Not Applicable Ζiρ Ζp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent erbent-Cook.... COOK, KERMIT M 2902 PECAN AVE LEESBURG FL 34748 cin Lady Lake 8. 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. I am familiar with, the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition Deteta TITLE THE соок, с н NAME NAME STREET ADDRESS 1901 KUTZ TOWN RD STREET ADDRESS READING PA 19604 CITY-ST-ZIP CHY-ST-7P ☐ Delete Change Addition TITLE NAME COOK, BRUCE W NAME STREET ADDRESS 1901 KUTZ TOWN RD STREET ADDRESS CITY-ST-ZIP READING PA 19604 CITY-ST-ZIP Change DE DELETO TITLE ☐ Addition TITLE NAME COOK, KERMIT M STREET ADDRESS STREET ADDRESS 2902 PECAN AVE CITY-ST-ZIP_ LEESBURG FL 34748-CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED