## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # P97000030925**

AMERICAN PIONEER MORTGAGE SERVICES, INC.



## **FILED** Apr 30, 2007 8:00 am Secretary of State

04-30-2007 90432 015 \*\*\*150.00

Principal Place of Business

639 E. OCEAN AVE SUITE 308

**BOYNTON BEACH, FL 33435** 

Mailing Address

639 E. OCEAN AVE SUITE 308

BOYNTON BEACH, FL 33435



	DO	NOT	WRITE	IN	THIS	SPACE
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CR2E034 (11/05) 04242007 No Chg-P Applied For 4. FEI Number 65-0746592 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 

6. Name and Address of Current Registered Agent

HEIDE, WILLIAM GEORGE 639 E. OCEAN AVE SUITE 308 **BOYNTON BEACH, FL 33435** 

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

			-			
	named entity submits this statement for the patients of registered agent.	ourpose of changing its registered o	flice or r	agistered agent, or bo	oth, in the State of Florida. I am familiar o	vith, and accept
SIGNATURE.	Signature typed or printed name of registered agent and life	r applicable [NOTE: Registered Age	ni signature	required when sussiding)	4/26/07 OATE	No Cuance
FILE NOWIII FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME SIREET ADDRESS CITY-ST-ZIP	D HEIDE, WILLIAM GEORGE 1275 N SWINTON AVE DELRAY BEACH, FL 33444			- <b>*</b> ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEIDE, KURT W 631 ANCHOR RD DELRAY BEACH, FL 33444					
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of the con	erily that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	I to execute this report as required (	ilons con shall hav by Chapt	stained in Chapter 11: e the same legal effe ter 607, Florida Statut	9 Florida Statules. I further certify that ct as if made under oath; that I am an oldes: and that my name appears in Block	the Information ficer or director 10 or Block 11 if