

DOCUMENT # P98000073125					
1. Entity Name MORTGAGE EXPRESS OF AMERICA, INC.					
Principal Place of Business 12355 COLLIER BLVD STE B NAPLES, FL 34116			Mailing Address 12355 COLLIER BLVD STE B NAPLES, FL 34116		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent					
RITCHIE, CHRISTOPHER 12355 COLLIER BLVD STE B NAPLES, FL 34116					Name
					Street Address
					City
8. The above named entity submits this statement for the purpose of changing its registered office or registering the obligations of registered agent.					
SIGNATURE: _____ (NOTE: Registered Agent signature required)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5 Adk		
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		PD RITCHIE, CHRIS 1441 SE 19TH TERRACE CAPE CORAL, FL 33990		<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VS BUCKMAN, GAIL 470 ELK CIR. MARCO ISLAND, FL 34145		<input checked="" type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				<input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP				<input type="checkbox"/> Delete	
11.					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		VS LAL 408 NA			
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> VS					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					