


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005 8:00 am
Secretary of State

04-01-2005 90008 021 ***150.00

DOCUMENT # P98000097198 1. Entity Name AMERICAN CASH OF FLORIDA, INC.	
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Principal Place of Business 8626 56TH ST, NORTH TEMPLE TERRACE, FL 33617	Mailing Address 14421 NEWGATE ROAD MIDLOTHIAN, VA 23113
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DO NOT WRITE IN THIS SPACE

13901 DUNKELD Terrace 40044030



03242005 No Chg-P CR2E034 (10/03)

4. FEI Number 54-1919248	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCCORMICK, STEPHEN F MR. 4445 SOUTHERN BREEZE DR. #4927 NAPLES, FL 34114
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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, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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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"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MR. MCCORMICK, STEPHEN F MR. 14421 NEWGATE ROAD MIDLOTHIAN, VA 23113
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12. I hereby 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.

SIGNATURE: <u>Paul A. Cunningham</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Vice President 3/28/05 (330)630-2583 <small>Date Daytime Phone #</small>
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