## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000019006  1. Entity Name ADVANTAGE FIRST MORTGAGE CORP.				
496 TINA PL	LACE	Mailing Address 496 TINA PLACE		
MERRITT ISL	AND, FL 32952	MERRITT ISLAND, FL 32952		
DO NOT WRITE IN THIS SPACE				01112005 No Chg-P CR2E034 (10/03)
DO NOT WHITE IN THIS OF ACE			<b>-</b>	4, FEI Number   Applied For   59-3562399   Not Applicable
	6. Name and Address of Current Regi	stered Agent		5. Certificate of Status Desired Status Pesired Status Desired Status Pesired Status Desired Sta
BUSINESS FILINGS INCORPORATED 660 EAST JEFFERSON STREET TALLAHASSEE, FL 32301-0000				DO NOT WRITE IN THIS SPACE
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				
FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees				
10.	OFFICERS AND DIRE	CTORS		
NAME	DYKE, WILLIAM L			
STREET ADDRESS CITY-ST-ZIP	496 TINA PLACE MERRITT ISLAND, FL 32952			
title Name	DYKE, ROBERT G	, , , , , , , , , , , , , , , , , , ,	<u>}</u>	
STREET ADDRESS	5823 MONTGOMERY RD			
CITY-ST-ZIP TITLE	ELKRIDGE, MD 21075	<u></u>		
NAME STREET ADDRESS				
CITY-ST-ZIP				DO NOT WRITE
TITLE NAME		· ·		IN THIS SPACE
STREET ADDRESS				
CITY-ST-ZIP		·		
NAME		-		
STREET ADDRESS CITY-ST-ZIP			l	
TITLE		····	1	
NAME STREET ADDRESS				
CITY-ST-ZIP		<u></u>		
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: William L. Dyke William L. Dyke 3/20/05 321-449-00>2  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Dayring Phase of				
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