## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000021468

Entity Name: A PLUS MORTGAGE AND FINANCIAL SERVICES, INC.

FILED Feb 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5889 AIRPORT RD 5889 S WILLIAMSON BLVD

SUITE 203 SUITE 203

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32128 US

Current Mailing Address: New Mailing Address:

5889 AIRPORT RD 5889 S WILLIAMSON BLVD

SUITE 203 SUITE 203

PORT ORANGE, FL 32128 US PORT ORANGE, FL 32128 US

FEI Number: 59-3555419 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MYERS, RUSSELL
5889 AIRPORT RD
STE 203

MYERS, RUSSELL
5889 S WILLIAMSON BLVD
STE 203

STE 203

PORT ORANGE, FL 32124 US PORT ORANGE, FL 32128 US

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.

SIGNATURE: 02/08/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: MYERS, RUSSELL F Name: MYERS, RUSSELL F

Address: 5889 AIRPORT RD STE 203 Address: 5889 S WILLIAMSON BLVD., STE 203

City-St-Zip: PORT ORANGE, FL 32124 City-St-Zip: PORT ORANGE, FL 32128

Title: STDP ( ) Delete Title: STDP (X) Change ( ) Addition

Name: PRATER, JOHN R Name: PRATER, JOHN R

Address: 5889 AIRPORT RD STE 203 Address: 5889 S WILLIAMSON BLVD., STE 203

City-St-Zip: PORT ORANGE, FL 32124 City-St-Zip: PORT ORANGE, FL 32128

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL F MYERS PRES 02/08/2005