## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000021468

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

FILED Mar 12, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

**PRFS** 

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

5889 S WILLIAMSON BLVD 1615 NEEDLE PALM DRIVE SUITE 203 EDGEWATER, FL 32132

PORT ORANGE, FL 32128 US

Current Mailing Address: New Mailing Address:

5889 S WILLIAMSON BLVD 1615 NEEDLE PALM DRIVE SUITE 203 EDGEWATER, FL 32132 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 F
5889 S WILLIAMSON BLVD
STE 203
PORT ORANGE, FL 32128 US

MYERS, RUSSELL F
1615 NEEDLE PALM DRIVE
EDGEWATER, FL 32132 U

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: 03/12/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete Title:

Name:MYERS, RUSSELL FName:MYERS, RUSSELL FAddress:5889 S WILLIAMSON BLVD., STE 203Address:1615 NEEDLE PALM DRIVE

Address: 5889 S WILLIAMSON BLVD., STE 203 Address: 1615 NEEDLE PALM DRIV City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: EDGEWATER, FL 32132

Title: STDP ( ) Delete Title: SEC (X) Change ( ) Addition Name: PRATER, JOHN R Name: PRATER, JOHN R

Address: 5889 S WILLIAMSON BLVD., STE 203 Address: 977 SAND CREST DRIVE
City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32127

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 03/12/2008