

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095175

FILED
Aug 24, 2004
Secretary of State

Entity Name: THE LOAN DOCTORS, INC.

Current Principal Place of Business:

325 MASTERS ROAD
PALM SPRINGS, FL 33461

New Principal Place of Business:

Current Mailing Address:

1111 WEST MC NAB RD
POMPAÑO BEACH, FL 33069

New Mailing Address:

325 MASTERS ROAD
PALM SPRINGS, FL 33461

FEI Number: 65-0958063

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARSHALL, CHARLIE
325 MASTERS ROAD
PALM SPRINGS, FL 33461 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MARSHALL, CHARLIE
Address: 325 MASTERS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: MARSHALL, CHARLIE
Address: 325 MASTERS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

Title: PCEO () Change (X) Addition
Name: MARSELLA, LARRY
Address: 325 MASTERS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

Title: SVP () Change (X) Addition
Name: MARSELLA, AYSEL
Address: 325 MASTERS ROAD
City-St-Zip: PALM SPRINGS, FL 33461

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: LARRY MARSELLA

PCEO

08/24/2004

Electronic Signature of Signing Officer or Director

_____ Date