## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09886

FILED Jul 04, 2006 Secretary of State

Entity Name: POMERANCE FINANCIAL CORPORATION OF FLORIDA

Current Principal Place of Business:			New Principal Place of Business:			
P.O. BOX LAKE MA	.952518 RY, FL 327959	518				
Current Mailing Address:			New Mailing Address	New Mailing Address:		
P.O. BOX LAKE MA	.952518 RY, FL 327959	518				
FEI Numbe	r: 58-1917802	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:		
	HY, TERENCE FEDERAL HWY					
STUART,		JS				
The above	FL 34996 L	JS	purpose of changing its registered	d office or registered agent, or both,		
The above in the Stat	FL 34996 Use named entityste of Florida.	JS	purpose of changing its registered	d office or registered agent, or both,		
The above	FL 34996 Le named entity see of Florida.	JS		d office or registered agent, or both,  Date		
The above in the Stat SIGNATU In accordar	e named entity see of Florida.  RE: Electror	JS submits this statement for the iic Signature of Registered Ag 3(2)(b), F.S., the corporation did n	ent			
The above in the State SIGNATU  In accordance Election Ca	e named entity see of Florida.  RE: Electror	US submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ).	ent ot receive the prior notice.			
The above in the State SIGNATU  In accordance Election Ca	e named entity see of Florida.  RE:  Electrorice with s. 607.19 impaign Financing S AND DIREC	JS submits this statement for the nic Signature of Registered Ag 3(2)(b), F.S., the corporation did n g Trust Fund Contribution ( ). TORS: Delete DAVID M., OWBEND LN	ent ot receive the prior notice.	Date		

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID M. POMERANCE	PTD	07/04/2006
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