2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S29572

1. Entity Name
PROFESSIONAL MORTGAGE & CONSOLIDATED SERVICES, INC.

Principal Place of Business	Mailing Address
1453 W BUSH BLVD TAMPA, FL 33612 US	1453 W BUSH BLVD TAMPA, FL 33612 US

DO NOT WRITE IN THIS SPACE

01042005   No Chg-P   CR2E034 (10/03)

4. FEI Number 59-3049954	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NORRIS, LARRY S
11618 WHITE ROOK CT
TAMPA, FL 33626

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_____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	NORRIS, LARRY S
STREET ADDRESS	11618 WHITEROOK CT
CITY-ST-ZIP	TAMPA, FL 33626

U00000184525
01/20/05-80033-004 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1~~ ~~ 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 ~~ ~~ 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 ~~ ~~ ny name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

PLEASE SIGN & DATE

SIGNATURE: _____ 1-13-05

C. Norris President