

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V73652

FILED
Mar 23, 2005
Secretary of State

Entity Name: FIRST CHOICE MORTGAGE AND INSURANCE, INC.

Current Principal Place of Business:

101 E YELKCA TERR STE F
EDGEWATER, FL 32132 US

New Principal Place of Business:

New Mailing Address:

P.O. BOX 70
NEW SMYRNA BCH, FL 32170 US

Current Mailing Address:

101 E. YELKCA TERR. STE 1
EDGEWATER, FL 32132 US

FEI Number: 59-3151020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVER, L TIMOTHY
101 E YELKCA TERR STE F
EDGEWATER, FL 32132 US

Name and Address of New Registered Agent:

OLIVER, L TIMOTHY L PRES
P.O. BOX 70
NEW SMYRNA BCH, FL 32170 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: TIMOTHY L. OLIVER

03/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: TIMOTHY L OLIVER,
Address: 101 E YELKCA TERR STE F
City-St-Zip: EDGEWATER, FL 32132

Title: VP () Delete
Name: KOWALL, PATRICK
Address: 3232 UMBRELLA TREE DR.
City-St-Zip: EDGEWATER, FL 32141

Title: S (X) Delete
Name: ROSKY, GERALD J
Address: 220 QUAY ASSISSI
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: OLIVER, TIMOTHY L PRES
Address: P.O. BOX 70
City-St-Zip: NEW SMYRNA BCH, FL 32170

Title: VP (X) Change () Addition
Name: KOWALL, PATRICK
Address: 3331 LIME TREE DR
City-St-Zip: EDGEWATER, FL 32141

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TIMOTHY L. OLIVER

PRES

03/23/2005

Electronic Signature of Signing Officer or Director

Date