


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 08:00 AM
Secretary of State

DOCUMENT # 183792
 1. Entity Name
KERWIN MORTGAGE CORPORATION



Principal Place of Business
FREDERICK K. BROWN
5944 S.W. 73RD STREET
MIAMI, FL 33143

Mailing Address
FREDERICK K. BROWN
5944 S.W. 73RD STREET
MIAMI, FL 33143



01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0745834 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

BROWN, FREDERICK K
5944 SW 73RD ST
S MIAMI, FL 33143

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BROWN, FREDERICK K., JR.
STREET ADDRESS	5944 SW 73RD ST.
CITY - ST - ZIP	S MIAMI, FL
TITLE	DS
NAME	LINDA B. HO
STREET ADDRESS	5944 SW 73RD ST.
CITY - ST - ZIP	S MIAMI, FL
TITLE	D
NAME	BROWN, LYNN M
STREET ADDRESS	5944 SW 73RD ST
CITY - ST - ZIP	S MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000008902
 01/20/04-80084-022 150.00

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 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  **FREDERICK K. BROWN, JR.** 1/16/2004 (305) 687-1472
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #