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2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #200883

FLORIDA BOND AND MORTGAGE, INC.



Principal Place of Business

Mailing Address

3696 N. FEDERAL HIGHWAY

3696 N. FEDERAL HIGHWAY

STE 200 FT LAUDERDALE, FL 33308

US

STE 200 FT LAUDERDALE, FL 33308 US

03282008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0822730

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

FILED

Apr 03, 2008 08:00 Al Secretary of State

6. Name and Address of Current Registered Agent

RAMSEY, DAVID W 3696 N. FEDERAL HIGHWAY #200

FT LAUDERDALE, FL 33308

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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 Fiorida. 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 NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financin Trust Fund Contribution.	g 	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				
TITLE	P				
NAME	RAMSEY, DAVID W 3696 N. FEDERAL HWY., #200				
STREET ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308				
TITLE	EXVP				
NAME	QUAILEY, BRUCE A				U00000879352
STREET ADDRESS	3696 N. FEDERAL HWY., #200				04/15/08-80018-001 150.00
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 iddress, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP