2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M78148

1. Entity Name FIRST ATLANTIC MORTGAGE CORP. OF DAYTONA **BEACH**



Principal Place of Business

1301 BEVILLE RD., SUITE 1 DAYTONA BCH., FL 32119

Mailing Address

1301 BEVILLE RD., SUITE 1 DAYTONA BCH., FL 32119

FILED Jan 09, 2004 08:00 AM Secretary of State

U00000001678 01/12/04-80020-008 150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/03) Applied For 4. FEI Number 59-2895119 Not Applicable

5. Certificate of Status Desired

01062004

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BAXTER, J. AARON 1301 BEVILLE RD., SUITE #1 DAYTONA BCH., FL 32119

DO NOT WRITE IN THIS SPACE

No Chg-P

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, 2004 Fee wil! be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTS AARON, BAXTER J 1301 BEVILLE RD STE 1 DAYTONA BCH., FL	- ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY - ST - ZIP			DC	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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				