## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 654911** 

Entity Name: SENTINEL MORTGAGE COMPANY

FILED Feb 25, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1819 MAIN ST STE 301

SARASOTA, FL 34236 US

Current Mailing Address: New Mailing Address:

1819 MAIN ST STE 301

SARASOTA, FL 34236 US

FEI Number: 59-1969111 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HODGES, JOHN M. 889 N. WASHINGTON BLVD SARASOTA, FL 34236 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PTD ( ) Delete

 Name:
 WITTIG, THEODORE K,

 Address:
 6540 WILD ORCHID LN

 City-St-Zip:
 SARASOTA, FL 34241

 Title:
 EVP ( ) Delete

 Name:
 WILF, LINDA G

 Address:
 2828 SUNCREST DR

 City-St-Zip:
 SARASOTA, FL 34239

 Title:
 SVP
 ( ) Delete

 Name:
 APPIGNANI, SANDRA M

 Address:
 707 S GULFSTREAM AVE

 City-St-Zip:
 SARASOTA, FL 34236

Title: AS ( ) Delete
Name: MARER, FLORENCE
Address: 3711 LAKEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: PTD (X) Change ( ) Addition
Name: WITTIG, THEODORE K
Address: 6540 WILD ORCHID LN

Address: 6540 WILD ORCHID LN City-St-Zip: SARASOTA, FL 34241

Title: EVP (X) Change () Addition

Name: WILF, LINDA G Address: 2828 SUNCREST DR City-St-Zip: SARASOTA, FL 34239

Title: EVP (X) Change ( ) Addition Name: APPIGNANI, SANDRA M

Name: APPIGNANI, SANDRA M Address: 707 S GULFSTREAM AVE City-St-Zip: SARASOTA, FL 34236

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: THEODORE K. WITTIG PTD 02/25/2004