

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701167

FILED
Jan 10, 2005
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF MORTGAGE BROKERS, INC.

Current Principal Place of Business:

1292 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6477
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 23-7306295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WORDELL-SMITH, KAREN J
1292 CEDAR CENTER DRIVE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: SCHNEIDER, STEVEN
Address: 1500 SAN REMO VAE. #248
City-St-Zip: CORAL GABLES, FL 32922

Title: VD () Delete
Name: WORKMAN, D RITCH
Address: 2720 N HARBOR CITY BLVD
City-St-Zip: MELBOURNE, FL 32935

Title: PPD () Delete
Name: FERRIE, LYNN T
Address: 1100 WEST GARDEN STREET
City-St-Zip: PENSACOLA, FL 32503

Title: PED () Delete
Name: JOHNSON, VAN
Address: 125 EAST INDIANA AVENUE
City-St-Zip: DELAND, FL 32724

Title: E/D () Delete
Name: WORDELL-SMITH, KAREN J
Address: 1292 CEDAR CENTER DRIVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: PD () Delete
Name: NELSON, LOCKE
Address: 10800 BISCAYNE BLVD. #500
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: GULDI, KELLY
Address: 705 WEST S-R 434, SUITE D
City-St-Zip: LONGWOOD, FL 32750

Title: PED (X) Change () Addition
Name: SCHNEIDER, STEVEN
Address: 1500 SAN REMO AVENUE, #248
City-St-Zip: CORAL GABLES, FL 33146

Title: PPD (X) Change () Addition
Name: LOCKE, NELSON
Address: 3459 NE 163RD STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33161

Title: VD (X) Change () Addition
Name: YAMATO, PATRICE
Address: 3030 HARTLEY ROAD, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32257

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

Title: PD (X) Change () Addition
Name: JOHNSON, VAN
Address: 125 EAST INDIANA AVENUE
City-St-Zip: DELAND, FL 32724

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN J. WORDELL-SMITH

E/D

01/10/2005

Electronic Signature of Signing Officer or Director

Date