


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 15, 2004 08:00 AM
Secretary of State

DOCUMENT # 205801	
1. Entity Name ORMOND BEACH MORTGAGE & INVESTMENT CO.	

Principal Place of Business 444 SEABREEZE BLVD. SUITE 400 DAYTONA BEACH, FL 32118-0991	Mailing Address 444 SEABREEZE BLVD. SUITE 400 DAYTONA BEACH, FL 32118-0991
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DO NOT WRITE IN THIS SPACE



04132004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3029881	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent EVERY, WALTER R. 444 SEABREEZE BLVD., SUITE 400 DAYTONA BEACH, FL 32118-0991

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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reconstituting)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT EVERY, WALTER R 444 SEABREEZE BLVD. DAYTONA BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S TOMS, CATHERINE 444 SEABREEZE BLVD. DAYTONA BEACH, FL
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04/15/04-80057-016 150.00

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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 807, 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: <u>Walter R. Every</u> WALTER R. EVERY	Date <u>4-13-04</u>	Exemption Phrase # <u>(386)255-1925</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		