


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2004 8:00 am**  
**Secretary of State**

02-09-2004 90049 049 \*\*\*150.00

<b>DOCUMENT # 418988</b>			
1. Entity Name <b>H &amp; H HOME MORTGAGE CORP.</b>			
Principal Place of Business <b>2800 BROADWAY RIVIERA BEACH FL 33404</b>		Mailing Address <b>2800 BROADWAY RIVIERA BEACH FL 33404</b>	
2. Principal Place of Business <b>2826 Broadway</b>		3. Mailing Address	
Suite, Apt. #, etc. <b>201</b>		Suite, Apt. #, etc.	
City & State <b>Riviera Beach, Fl.</b>		City & State	
Zip <b>33404</b>	Country <b>PB</b>	Zip	Country

J4011007



MOORE CR2E034 (11/03)

4. FEI Number <b>59-1452928</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent <b>HENDRICKS, LARRY D. 2800 BROADWAY RIVIERA BEACH FL 33404</b>		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
<b>2826 Broadway, Suite 201</b>		<b>2826 Broadway, Suite 201</b>	
City <b>Riviera Beach</b>		City <b>FL</b>	
Zip Code <b>33404</b>		Zip Code <b>33404</b>	
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 <i>Larry D. Hendricks</i>		SIGNATURE <i>Larry D. Hendricks</i>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
DATE		DATE	

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENDRICKS, LARRY D. 5520 LAKE SHORE DRIVE WEST PALM BCH FL <i>Address Change</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address 8030-154 <sup>th</sup> Road North PALM BEACH GARDENS, Fla. (33418)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HENDRICKS, GAYLORD E. 5500 LAKESHORE DR. WEST PALM BCH FL <i>Address Change</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Address 19697 N. Riverside Drive Teguceta, Fla. (33469)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

**SIGNATURE:** *Larry D. Hendricks - Larry D. Hendricks (2-4-04) 561-848-4331*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #