2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000002355

FILED Jan 06, 2004 Secretary of State

Entity Name: LOW BANK RATE MORTGAGE COMPANY **Current Principal Place of Business: New Principal Place of Business:** 160 MANSION ROAD WALLINGFORD, CT 06492 **Current Mailing Address: New Mailing Address:** 160 MANSION ROAD WALLINGFORD, CT 06492 FEI Number: 06-1497458 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: LOVELL, RON 407 S. DIXIE HWY., SUITE 5 LAKE WORTH, FL 33460 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: () Delete Title: () Change () Addition HOFFMAN, SYLVIA M Name: Name: 160 MANSION ROAD Address: Address: City-St-Zip: WALLINGFORD, CT 06492 City-St-Zip:

Title: () Delete Title:

(X) Change () Addition TORO, FRANK JR. Name: Name: KOPEC, ELIZABETH 22 TRUMBULL STREET Address: 886 S. MAIN STREET Address: PLANTSVILLE, CT 06479 NEW HAVEN, CT 06511 City-St-Zip: 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: SYLVIA M. HOFFMAN **PRES** 01/06/2004