

2004 FOR PROFIT CORPORATION ANNUAL REPORT

May 07
Secr

DOCUMENT # F01000002684

1. Entity Name

THIRD COMMUNITY MORTGAGE, CORP.



Principal Place of Business

112 SOUTH WATER ST.

#C

KENT, OH 44240

Mailing Address

112 SOUTH WATER ST.

#C

KENT, OH 44240



05042004

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

34-1691012

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COMPLIANCE CONSULTING CORPORATION OF FLORI

DA

521 LAKE AVE., STE 4

LAKE WORTH, FL 33460

**DO NOT WRITE
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

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when resigning)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE

P

NAME

RUBIN, CHARLES A

STREET ADDRESS

2271 FIRST ST. UNIT #22

CITY - ST - ZIP

FORT MYERS, FL 33901

TITLE

V

NAME

RUBIN, ADAM B

STREET ADDRESS

7591 BIRKNER DRIVE

CITY - ST - ZIP

KENT, OH

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

000000158158
05/07/04-80010-009 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Charles A. Rubin CHARLES A. RUBIN

430-04 2392180350

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #