

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90289 048 \*\*\*150.00

DOCUMENT # F02000003053

1. Entity Name  
GLOBAL MORTGAGE, INC.



Principal Place of Business  
14440 MYER LAKE CIRCLE  
CLEARWATER, FL 33760

Mailing Address  
4912 CREEKSIDE DRIVE  
CLEARWATER, FL 33760

11011519



2. Principal Place of Business  
14440 Myerlake Circle  
Suite, Apt. #, etc.

3. Mailing Address  
14440 Myerlake Circle  
Suite, Apt. #, etc.

04272004 Chg-P CR2E034 (10/03)

City & State  
Clearwater, Florida  
Zip 33760 Country Pinellas

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Clearwater, Florida  
Zip 33760 Country Pinellas

4. FEI Number  
48-1262080  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME LOSCH, DEBRA A  
STREET ADDRESS 14440 MYER LAKE CIRCLE  
CITY-ST-ZIP CLEARWATER, FL 33760

TITLE STD ☐ Delete  
NAME LOSCH, SCOTT A  
STREET ADDRESS 4912 CREEKSIDE DRIVE  
CITY-ST-ZIP CLEARWATER, FL 33760

TITLE CEO ☒ Delete  
NAME LOSCH, SCOTT A  
STREET ADDRESS 14440 MYER LAKE CIRCLE  
CITY-ST-ZIP CLEARWATER, FL 33760

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VS ☒ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PT ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 14440 Myerlake Circle  
CITY-ST-ZIP Clearwater, FL 33760

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Scott Losch President and Treasurer 04/27/04 727-324-2020

Date Daytime Phone #