


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90038 010 ***150.00

DOCUMENT # F02000003435	
1. Entity Name HOMEBRIDGE MORTGAGE BANKERS CORP.	

Principal Place of Business 60 OAK DRIVE SYOSSET, NY 11791	Mailing Address 60 OAK DRIVE SYOSSET, NY 11791
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04072008 Chg-P CR2E034 (12/06)

4. FEI Number 11-3082077	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent COMPLIANCE CONSULTING CORPORATION OF FLA 1013 LUCERNE AVENUE SUITE 201 LAKE WORTH, FL 33460		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 reinstating)	DATE
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRATSAFOLIS, MICHELLE S DIRECTO 440 WEST END AVE., #4B NEW YORK, NY 10024 <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	C BRATSAFOLIS, NICHOLAS A CHAIRMA 440 WEST END AVE., #4B NEW YORK, NY 10024 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PIC BRATSAFOLIS, NICHOLAS A. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 440 WEST END AVENUE, #4B NEW YORK, NY 10024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELDSTEIN, SHARON DIRECTO 29 JUNEAU BLVD WOODBURY, NY 11797 <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	O PANKIN, DAVID I PRESIDE 60 OAK DRIVE SYOSSET, NY 11791 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	O EPSTEIN, DONALD. CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 60 OAK DRIVE SYOSSET NY 11791
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COOS LEVINE, PAUL 60 OAK DRIVE SYOSSET, NY 11791 <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	O MCBRIEN, FRANK TREASUR 60 OAK DRIVE SYOSSET, NY 11791 <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 exemptions contained in Chapter 119, 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: Donald Epstein, CFO	4/8/08 516-998-4438
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Daytime Phone #

DONALD EPSTEIN, CFO

ATTACHMENT

40063341

#F02000003935

EXHIBIT 1

REFINANCE.COM

LIST OF OFFICERS and BOARD OF DIRECTORS

Dated February 2008

<i>Name and Address of Officers</i>	<i>Title</i>
Nicholas A. Bratsafolis 60 Oak Drive Syosset, NY 11791 (516) 998-4400	President
Donald Epstein 60 Oak Drive Syosset, NY 11791 (516) 998-4438	Chief Financial Officer
Frank Mc Brien 60 Oak Drive Syosset, NY 11791 (516) 998-4410	Treasurer
Paul A. Levine 60 Oak Drive Syosset, NY 11791 (516) 998-4444	Secretary/C.O.O.
<i>Name of Directors</i>	
Michelle S. Bratsafolis 60 Oak Drive Syosset, NY 11791	Director
Nicholas A. Bratsafolis 60 Oak Drive Syosset, NY 11791	Chairman
Sharon Feldstein 60 Oak Drive Syosset, NY 11791	Director