## F02000005106

	aquestors Name				
(Requestor's Name)					
(Ac	ldress)				
(Address)					
(Cit	ty/State/Zip/Phon <b>e</b> #)	<del></del>			
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PICK-UP	MAIT WAIT	MAIL			
(Bu	isiness Entity Name)	<del></del>			
(Do	ocument Number)				
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Special Instructions to	Filing Officer:				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations					
SUBJECT: 1ST NEW ENGLAND MORTGAGE CORP.  (Name of Corporati	on)				
DOCUMENT NUMBER: F02000005106					
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.				
Please return all correspondence concerning this matter to the f	following:				
KIRK MCNEILL					
(Name of Contact Person)					
1ST NEW ENGLAND MORTGAGE CORP.					
(Firm/Company)					
157 MAIN DUMOTARIE BOAD					
157 MAIN DUNSTABLE ROAD (Address)					
,					
NASHUA, NH 03060					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
	(02 . 500 6000				
KIRK MCNEILL at (Name of Contact Person)	603 598-6000 Area Code & Daytime Telephone Number)				
	• •				
Enclosed is a \$35.00 check made payable to the Department of	State.				
Mailing Address: Amendment Section	Street Address: Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				
	Tallahassee, FL 32301				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	ovisions of sections 607, e is submitted for a corp o change its registered o	ooration organized	under the laws of the S	tate of NEW HAMPSHIRE
1. The name of the	corporation: <u>1ST_NE</u>	W ENGLAND MOI	RTGAGE CORP.	
2. The principal of	fice address: 157 MA	IN DUNSTABLE	ROAD	
	NASHUA	, NH 03060		
3. The mailing add	ress (if different):			
4. Date of incorpor	ation/qualification: 0	6/1987	Document number:	F02000005106
5. The name and st Florida Departm	reet address of the curre ent of State:	nt registered agent	and registered office or	a file with the
	THOMAS ALL	ARD		<del></del>
	213 RUSS D	RIVE		
<del>-</del>	GULF BREEZ	E, FL 32561		7A 2
6. The name and st (if changed):	reet address of the new to		changed) and /or regist	FIL EB~9 IASSEE
	595 MAIN S	TREET		PH FE
_		ox NOT acceptable)		4: 2
-	DUNEDIN, F	L 34698		& ω
as changed will be	identical.			fice of its registered agent,
authorized by the	outhorized by resolution poard, or the corporation	n has been notifie	d in writing of the char	nge.
(Signature of	of an officer or director)		JAY M. KERRIGAN (Printed or typed	
I hereby accept the I further agree to c of my duties, and I document is being corporation has be	e appointment as regist comply with the provisi am familiar with and c filed merely to reflect c en notified in writing (	ered agent and ag ons of all statutes accept the obligat a change in the re of this change.	ree to act in this capac relative to the proper ion of my position as re gistered office address	city. and complete performance egistered agent. Or, if this , I hereby confirm that the
(Signat	ure of Registered Agent)	r _	Sieh of 200	/ <del>?</del> _
MARK W. BRAND  If signing on behal				
FRAZER, HUBBAR	D, BRANDT, TRASK	AND YACAVONE	. LLP	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

\* \* \* FILING FEE: \$35.00 \* \* \*