

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006057

FILED  
Jun 30, 2004  
Secretary of State

Entity Name: GCB MORTGAGE, INC.

## Current Principal Place of Business:

633 WASHINGTON AVE., STE. 201  
NEWPORT, KY 41071

## New Principal Place of Business:

631 WASHINGTON AVE.  
NEWPORT, KY 41071

## Current Mailing Address:

633 WASHINGTON AVE., STE. 201  
NEWPORT, KY 41071

## New Mailing Address:

631 WASHINGTON AVE.  
NEWPORT, KY 41071

FEI Number: 01-0559892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COZZOCREA, DAVID P  
1400 METROPOLITAN BLVD., STE. 210  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

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:

Title: CP ( ) Delete  
Name: CALDERINI, KATHY  
Address: 633 WASHINGTON AVE., STE. 201  
City-St-Zip: NEWPORT, KY 41071

Title: VCVP ( ) Delete  
Name: BROWN, ROBERT C  
Address: 633 WASHINGTON AVE., STE. 201  
City-St-Zip: NEWPORT, KY 41071

Title: S ( ) Delete  
Name: BROWN, ROBERT C  
Address: 633 WASHINGTON AVE., STE. 201  
City-St-Zip: NEWPORT, KY 41071

Title: DEVP (X) Delete  
Name: WILSON, JOHN J  
Address: 633 WASHINGTON AVE., STE. 201  
City-St-Zip: NEWPORT, KY 41071

Title: T ( ) Delete  
Name: WILSON, JOHN J  
Address: 633 WASHINGTON AVE., STE. 201  
City-St-Zip: NEWPORT, KY 41071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: CALDERINI, KATHY  
Address: 631 WASHINGTON AVE.  
City-St-Zip: NEWPORT, KY 41071

Title: VCVP (X) Change ( ) Addition  
Name: BROWN, ROBERT C  
Address: 631 WASHINGTON AVE.  
City-St-Zip: NEWPORT, KY 41071

Title: S (X) Change ( ) Addition  
Name: BROWN, ROBERT C  
Address: 631 WASHINGTON AVE.  
City-St-Zip: NEWPORT, KY 41071

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: KATHY, CALDERINI A  
Address: 631 WASHINGTON AVE.  
City-St-Zip: NEWPORT, KY 41071

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: KATHY CALDERINI

CP

06/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date