

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000796

Entity Name: PAR EAST MORTGAGE CO., INC.

FILED
Jan 05, 2005
Secretary of State

Current Principal Place of Business:

15 TOILSOME LANE
EAST HAMPTON, NY 11937

New Principal Place of Business:

Current Mailing Address:

15 TOILSOME LANE
EAST HAMPTON, NY 11937

New Mailing Address:

FEI Number: 11-3201595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEXISNEXIS DOCUMENT SOLUTIONS INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: ROMANZI, PATRICIA A
Address: 15 TOILSOME LANE
City-St-Zip: EAST HAMPTON, NY 11937

Title: VP () Delete
Name: FETTES, DAVID
Address: 15 TOILSOME LANE
City-St-Zip: EAST HAMPTON, NY 11937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: FETTES, DAVID T
Address: 15 TOILSOME LANE
City-St-Zip: EAST HAMPTON, NY 11937

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: DAVID T FETTES

VP

01/05/2005

Electronic Signature of Signing Officer or Director

Date