

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001960

FILED  
Jan 15, 2004  
Secretary of State

Entity Name: HEARTLAND MORTGAGE OF OHIO, CORPORATION

**Current Principal Place of Business:**

130 NORTH WILSON ROAD  
COLUMBUS, OH 43204

**New Principal Place of Business:**

**Current Mailing Address:**

130 NORTH WILSON ROAD  
COLUMBUS, OH 43204

**New Mailing Address:**

FEI Number: 31-1293661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HAINES, MARK J  
113 LAUREL LANE  
PONTE VEDRA BEACH, FL 32082 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: PD ( ) Delete  
Name: DE LONG, C W  
Address: 130 NORTH WILSON ROAD  
City-St-Zip: COLUMBUS, OH 43204

Title: V ( ) Delete  
Name: STRUCK, LEE W  
Address: 130 NORTH WILSON ROAD  
City-St-Zip: COLUMBUS, OH 43204

Title: T ( ) Delete  
Name: DUELER, KARL  
Address: 130 NORTH WILSON ROAD  
City-St-Zip: COLUMBUS, OH 43204

Title: D ( ) Delete  
Name: LONG, JAMES  
Address: 850 N. HAMILTON ROAD  
City-St-Zip: GAHANNA, OH 43230

Title: CD ( ) Delete  
Name: MCCOMB, TINEY  
Address: 850 N. HAMILTON ROAD  
City-St-Zip: GAHANNA, OH 43230

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: C.W. DELONG

PD

01/15/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date