


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2005 08:00 AM
Secretary of State

DOCUMENT # F03000003715 1. Entity Name CLIFFCO MORTGAGE BANKERS, INC.	
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Principal Place of Business 1048 OLD COUNTRY ROAD WESTBURY, NY 11590	Mailing Address 1048 OLD COUNTRY ROAD WESTBURY, NY 11590
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DO NOT WRITE IN THIS SPACE

04202005 No Chg-P CR2E034 (10/03)

4. FEI Number 11-2975713	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAFARO, MONA
5938 CRYSTAL SHORES DR. #403
BOYNTON BEACH, FL 33437

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	11000000325970 04/23/05-00038-012-150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CLIFFORD, CHRISTOPHER 1048 OLD COUNTRY ROAD WESTBURY, NY 11590
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PERRUCCI, MARY 1048 OLD COUNTRY ROAD WESTBURY, NY 11590
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Christy Clifford* President **4/20/05** **516 408 7300 ext 104**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #