

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003840

FILED
Mar 23, 2004
Secretary of State

Entity Name: THE CONCISE MORTGAGE SOLUTIONS, INC.

Current Principal Place of Business:

8955 EDMONSTON RD. #M
GREENBELT, MD 20770

New Principal Place of Business:

Current Mailing Address:

8955 EDMONSTON RD. #M
GREENBELT, MD 20770

New Mailing Address:

FEI Number: 30-0179633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTIS, NOVLET P
301 WOODSTEAD LN
LONGWOOD, FL 32779 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

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: HARVEY, SONIA A
Address: 8955 EDMONSTON RD. #M
City-St-Zip: GREENBELT, MD 20770

Title: DVP () Delete
Name: HARVEY, HUGH
Address: 401 CENTERPOINTE CIR STE. 1501
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SONIA A. HARVEY

PRES

03/23/2004

Electronic Signature of Signing Officer or Director

Date