

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005595

FILED
Jan 13, 2005
Secretary of State

Entity Name: FOREMOST MORTGAGE ASSOCIATES, INC.

Current Principal Place of Business:

565 DYER AVENUE
CRANSTON, RI 02920

New Principal Place of Business:

Current Mailing Address:

565 DYER AVENUE
CRANSTON, RI 02920

New Mailing Address:

FEI Number: 05-0489509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA COMPLIANCE SPECIALISTS
2331 HANSEN PLACE
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: P () Delete
Name: KESELICA, MICHAEL N
Address: 18 MADELINE DRIVE
City-St-Zip: NEWPORT, RI 02840

Title: V () Delete
Name: CARAMANTE, ROBERT
Address: 116 CANDLEWOOD DRIVE
City-St-Zip: NORTH KINGSTOWN, RI 02852

Title: ST () Delete
Name: PETRONIO, EVERETT
Address: 39 EVERBLOOM DRIVE
City-St-Zip: CRANSTON POINT, RI 02920

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:

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: MICHAEL N. KESELICA

PRES

01/13/2005

Electronic Signature of Signing Officer or Director

Date