

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006645

FILED
Jan 06, 2004
Secretary of State

Entity Name: GENEVA MORTGAGE CORP

Current Principal Place of Business:

100 N CENTRE AVENUE 300
300
ROCKVILLE CENTRE, NY 11570

New Principal Place of Business:

Current Mailing Address:

100 N CENTRE AVENUE
SUITE 300
ROCKVILLE CENTRE, NY 11570

New Mailing Address:

FEI Number: 22-3091643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIBMAN, GENE ESQ.
600 NORTHEAST THIRD AVENUE
FORT LAUDERDALE, FL 33304 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: HAFFNER, KEITH
Address: 100 N CENTRE AVENUE 300
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: D () Delete
Name: GOLD, JOEL
Address: 100 N CENTRE AVENUE 300
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: D () Delete
Name: KREITMAN, STANLEY
Address: 100 N CENTRE AVENUE 300
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: D () Delete
Name: KATZ, WARREN
Address: 100 N CENTRE AVENUE 300
City-St-Zip: ROCKVILLE CENTRE, NY 11570

Title: EVP (X) Delete
Name: MAYER, STEPHEN
Address: 100 N CENTRE AVE 300
City-St-Zip: ROCKVILLE CENTRE, NY 11570

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: KEITH HAFFNER

PRES

01/06/2004

Electronic Signature of Signing Officer or Director

_____ Date