

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005555

FILED
Jul 09, 2004
Secretary of State

Entity Name: GOLDEN FIRST MORTGAGE CORP.

Current Principal Place of Business:

1 HUNTINGTON QUAD., 3RD FL CENTER WING
MELVILLE, NY 11747

New Principal Place of Business:

3 GRACE AVENUE
GREAT NECK, NY 11021

Current Mailing Address:

1 HUNTINGTON QUAD., 3RD FL CENTER WING
MELVILLE, NY 11747

New Mailing Address:

3 GRACE AVENUE
GREAT NECK, NY 11021

FEI Number: 11-2540158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CD () Delete
Name: MOVTADY, DAVID
Address: 23 HARBOR ROAD
City-St-Zip: KINGS POINT, NY

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: MOVTADY, DAVID
Address: 23 HARBOR ROAD
City-St-Zip: KINGS POINT, NY 11024

Title: VP () Change (X) Addition
Name: MEDINA, HELEN
Address: 28 WINDCREST DRIVE
City-St-Zip: MANORVILLE, NY 11949 US

Title: TREA () Change (X) Addition
Name: BRUCE, BARBARA TREASUR
Address: 18 TOWNSEND PLACE
City-St-Zip: SYOSSET, NY 11791 US

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: DAVID MOVTADY

CEO

07/09/2004

Electronic Signature of Signing Officer or Director

_____ Date