2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# F98000002570

Entity Name: CMC MORTGAGE BANKERS CORP.

Current Principal Place of Business:

3555 FEDERAL HWY
BOCA RATON, FL 33478

New Principal Place of Business:

1515 N. FEDERAL HWY
BOCA RATON, FL 33478

Current Mailing Address:

CONCORD MORTGAGE CORP.
25 MELVILLE PARK RD
MELVILLE, NY 11747

New Mailing Address:

FEI Number: 11-3404915 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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: CP ( ) Delete
Name: CHIERT, RICHARD
Address: 315 MAPLE STREET
City-St-Zip: WEST HEMPSTEAD, NY 11552

Title: CST (X) Delete
Name: CHIERT, DONALD
Address: 15 WIMBLEDON DR.
City-St-Zip: ROSLYN, NY 11576

Title: D ( ) Delete
Name: CHIERT, MITCHELL
Address: 351 BALTUSTROL CIRCLE
City-St-Zip: ROSLYN, NY 11576

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: CST (X) Change ( ) Addition
Name: CHIERT, MITCHELL
Address: 351 BALTUSTROL CIRCLE
City-St-Zip: ROSLYN, NY 11576

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MALIA IORIO ACCT 01/03/2007

Electronic Signature of Signing Officer or Director — Date