

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006576

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: STERLING NATIONAL MORTGAGE COMPANY, INC.

## Current Principal Place of Business:

98 CUTTERMILL ROAD  
SUITE 200N  
GREAT NECK, NY 11021 US

## New Principal Place of Business:

## Current Mailing Address:

98 CUTTERMILL ROAD  
SUITE 200N  
GREAT NECK, NY 11021 US

## New Mailing Address:

FEI Number: 11-3334993      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: BIZENOV, MICHAEL  
Address: 98 CUTTERMILL RD, SUITE 200N  
City-St-Zip: GREAT NECK, NY 11021

Title: S ( ) Delete  
Name: KRUMPER, NEAL  
Address: 98 CUTTERMILL RD, SUITE 200N  
City-St-Zip: GREAT NECK, NY 11021

Title: D ( ) Delete  
Name: MILLMAN, JOHN  
Address: 650 5TH AVE.  
City-St-Zip: NEW YORK, NY 10019

Title: D ( ) Delete  
Name: CAPPELLI, LOUIS  
Address: 650 5TH AVE.  
City-St-Zip: NEW YORK, NY 10019

Title: SVP ( ) Delete  
Name: TIMOTHY, AJAY  
Address: 98 CUTTERMILL ROAD, SUITE 200N  
City-St-Zip: GREAT NECK, NY 11021 US

## 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 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: NEAL KRUMPER

S

04/15/2009

Electronic Signature of Signing Officer or Director

Date