

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001041

FILED  
Apr 04, 2005  
Secretary of State

**Entity Name:** FIRST HOME MORTGAGE CORPORATION OF AMERICA

**Current Principal Place of Business:**

1127 BENFIELD BLVD  
STE M  
MILLERSVILLE, MD 21108 US

**New Principal Place of Business:**

**Current Mailing Address:**

7939 HONEYGO BLVD  
STE 200  
BALTIMORE, MD 21236 US

**New Mailing Address:**

8003 CORPORATE DRIVE  
STE A  
BALTIMORE, MD 21236 US

**FEI Number:** 52-1696740

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
% CT 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: WATERS, DAVID E  
Address: 550 POINTFIELD DR.  
City-St-Zip: MILLERSVILLE, MD 21108

Title: VCV ( ) Delete  
Name: OLMERT, ANTHONY  
Address: 1003 MELVIN ROAD  
City-St-Zip: ANNAPOLIS, MD 21403

Title: MGR ( ) Delete  
Name: ALEX, RICHARD  
Address: 43402 TURNBERRY ISLE  
City-St-Zip: LEESBURG, VA 20176

Title: VPSD ( ) Delete  
Name: HOWELL, ANNE  
Address: 3806 CEDARBROOKE PLACE  
City-St-Zip: BALTIMORE, MD 21236

Title: VP ( ) Delete  
Name: SMITH, CATHERINE  
Address: 108 LOCKLEVEN DRIVE  
City-St-Zip: SEVERNA PARK, MD 21146

Title: VP ( ) Delete  
Name: KLEIN, IRVIN  
Address: 2121 FOREST RIDGE RD  
City-St-Zip: TIMONIUM, MD 21093

**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:

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:** CATHERINE SMITH

VP

04/04/2005

Electronic Signature of Signing Officer or Director

Date