


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 13, 2004 8:00 am**  
**Secretary of State**

01-13-2004 90012 049 \*\*\*150.00

**DOCUMENT # G53682**  
 1. Entity Name  
**HMS MORTGAGE COMPANY, INC.**



Principal Place of Business  
**1625 NW 136TH AVE**  
**STE 200**  
**FORT LAUDERDALE, FL 33323 US**

Mailing Address  
**P O BOX 551540**  
**FT LAUDERDALE, FL 33355--154 US**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country



01062004 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-2349385**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>JUDGES, ROBERT</b> <b>1625 N.W. 136TH AVE, STE 200</b> <b>FORT LAUDERDALE, FL 33323</b>		Name Street Address (P.O. Box Number is Not Acceptable) City	
		State <b>FL</b> Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: <b>V</b> NAME: <b>WOLK, HOWARD</b> STREET ADDRESS: <b>1625 NW 136TH AVE STE 200</b> CITY-ST-ZIP: <b>FT LAUDERDALE, FL 33323</b>	<input type="checkbox"/> Delete	TITLE: <b>Director/V. President</b> NAME: <b>Wolk, Howard</b> STREET ADDRESS: <b>Same</b> CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <b>P</b> NAME: <b>BUCKTHORPE, KEVIN</b> STREET ADDRESS: <b>1625 NW 136TH AVE STE 200</b> CITY-ST-ZIP: <b>FT LAUDERDALE, FL 33323</b>	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <b>P</b> NAME: <b>BUCKTHORPE, KEVIN</b> STREET ADDRESS: <b>1625 N.W. 136TH AVE, STE 200</b> CITY-ST-ZIP: <b>FORT LAUDERDALE, FL 33323</b>	<input checked="" type="checkbox"/> Delete	TITLE: <b>Secretary/Treasurer</b> NAME: <b>Judges, Robert W.</b> STREET ADDRESS: <b>Same</b> CITY-ST-ZIP:	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: <b>D</b> NAME: <b>WOLK, SIDNEY D</b> STREET ADDRESS: <b>1625 N.W. 136TH AVE, STE 200</b> CITY-ST-ZIP: <b>FORT LAUDERDALE, FL 33323</b>	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <b>D</b> NAME: <b>WOLK, JEFFREY C</b> STREET ADDRESS: <b>1625 N.W. 136TH AVE, STE 200</b> CITY-ST-ZIP: <b>FORT LAUDERDALE, FL 33323</b>	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: <b>D</b> NAME: <b>WOLK, NATHAN T</b> STREET ADDRESS: <b>1625 N.W. 136TH AVE, STE 200</b> CITY-ST-ZIP: <b>FORT LAUDERDALE, FL 33323</b>	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Robert W. Judges* **Robert W. Judges** **1/6/04** **954-845-2325**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #