2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G68348 1. Entity Name OSPREY MORTGAGE COMPANY		
Principal Place of Business Mailing Address 200 CAPRI ISLES BLVD 200 CAPRI ISLES BLVD		
SUITE 2F SUITE 2F		
VENICE, FL 34292 US VENICE, FL 34292 US		
DO NOT WRITE IN THIS SPACE		04082004 No Chg-P CR2E034 (10/03)
		4. FEI Number Applied For 59-2369382 Not Applicable
		5 Cartificate of Status Decired
6. Name and Address of Current Registered Agent		Fee Required
DETERT, NANCY 200 CAPRI ISLES BLVD, SUITE 2F		DO NOT WRITE
VENICE, FL 34292		IN THIS SPACE
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 Signature, typed or printed name of registered agent and tifle it applicable (NOTE Register	red Agent signature required	when reinstating) DATE
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Fine Trust Fund Contribution		00 May Be 100000109534 ed to Fees 04/12/04-80051-011 150.00
10. OFFICERS AND DIRECTORS		
ITILE PST NAME DETERT, NANCY	1	
STREET ADDRESS 333 S. TAMIAMI TRAIL #388		
CITY-ST-ZP VENICE, FL	┨	
NAME STREET ADDRESS OTY-ST-ZIP		
TINLE	1	,
NAME STREET ADDRESS		
CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS GTY-ST-ZIP		IN THIS SPACE
THE	T 21 = 12 - 1	
NAME STREET ADDRESS CITY-ST-ZIP		
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NAME STREET ADDRESS CITY-ST-ZIP		
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 rue 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 attaching the military like empowered.		
SIGNATURE: NANCY DITERT 4/1/04 484-1867 SIGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR EXPRECTOR Dots Dots Dots Dots Dots Dots Dots Description Descripti		