


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

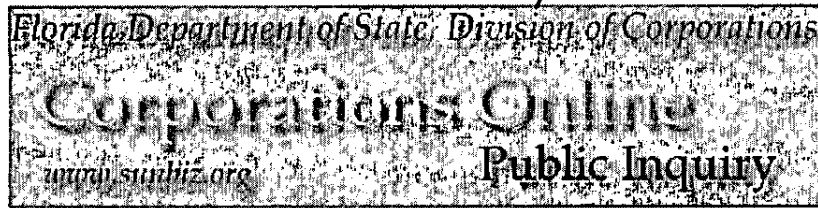
05-05-2004 90220 005 \*\*\*150.00

<b>DOCUMENT # K87623</b> 1. Entity Name <b>SOUTHERN MORTGAGE FUNDING CORPORATION</b>					
Principal Place of Business <b>2302 NW 66TH DRIVE</b> <b>BOCA RATON, FL 33496 US</b>			Mailing Address <b>2302 NW 66TH DRIVE</b> <b>BOCA RATON, FL 33496 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>65-0204542</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SCHOENFIELD, DAVID</b> <b>2302 NW 66TH DRIVE</b> <b>BOCA RATON, FL 33496</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHOENFIELD, DAVID		NAME		
STREET ADDRESS	551 NW 77 ST #207		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL		CITY-ST-ZIP		
TITLE	STD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHOENFIELD, DEBORAH ANN		NAME		
STREET ADDRESS	551 NW 77 ST #207		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 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: <i>Deborah A. Schoenfeld</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: <i>4/30/04</i> Daytime Phone #		

24069746



04192004 Chg-P CR2E034 (10/03)



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**Florida Profit****SOUTHERN MORTGAGE FUNDING CORPORATION**

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**PRINCIPAL ADDRESS**  
2302 NW 66TH DRIVE  
BOCA RATON FL 33496 US  
Changed 04/02/2001

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**MAILING ADDRESS**  
2302 NW 66TH DRIVE  
BOCA RATON FL 33496 US  
Changed 04/02/2001

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**Document Number**  
K87623

**FEI Number**  
650204542

**Date Filed**  
05/09/1989

**State**  
FL

**Status**  
ACTIVE

**Effective Date**  
NONE

**Last Event**  
REINSTATEMENT

**Event Date Filed**  
09/22/1994

**Event Effective Date**  
NONE

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**Registered Agent**

Name & Address
SCHOENFIELD, DAVID 2302 NW 66TH DRIVE BOCA RATON FL 33496
Name Changed: 06/27/1990
Address Changed: 04/02/2001

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**Officer/Director Detail**

Name & Address	Title
SCHOENFIELD, DAVID 551 NW 77 ST #207 BOCA RATON FL	PD
SCHOENFIELD, DEBORAH ANN 551 NW 77 ST #207	STD

Attachment

BOCA RATON FL

2/10/04  
#K87623

## Annual Reports

Report Year	Filed Date
2001	04/02/2001
2002	03/26/2002
2003	02/03/2003

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No Name History Information

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[04/04/1997 -- ANNUAL REPORT](#)  
[02/06/1996 -- 1996 ANNUAL REPORT](#)

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