

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L56312

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: RICHARDSON MORTGAGE COMPANY

**Current Principal Place of Business:**

941 NE 19TH AVENUE  
206  
FT. LAUDERDALE, FL 33304 US

**New Principal Place of Business:**

**Current Mailing Address:**

941 NE 19TH AVE.  
206  
FT. LAUDERDALE, FL 33304 US

**New Mailing Address:**

812 S.E. 11 COURT  
FT. LAUDERDALE, FL 33316 US

FEI Number: 65-0181798

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RICHARDSON, GLORIA  
812 S.E. 11TH COURT  
FT. LAUDERDALE, FL 33316 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: PS ( ) Delete  
Name: RICHARDSON, GLORIA,  
Address: 941 N.E. 19TH. AVENUE, STE. 206  
City-St-Zip: FT. LAUDERDALE, FL 33304

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PS (X) Change ( ) Addition  
Name: RICHARDSON, GLORIA,  
Address: 941 N.E. 19TH. AVENUE, STE. 206  
City-St-Zip: FT. LAUDERDALE, FL 33304 US

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: GLORIA RICHARDSON

PRES

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date