

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M90964

FILED
Apr 29, 2009
Secretary of State

Entity Name: SMART MORTGAGE CORPORATION

Current Principal Place of Business:

290 SW 12TH AVE
SUITE 4
POMPANO BEACH, FL 33069

New Principal Place of Business:

290 SW 12TH AVE
SUITE 4
POMPANO BEACH, FL 33069 US

Current Mailing Address:

290 SW 12TH AVE
SUITE 4
POMPANO BEACH, FL 33069

New Mailing Address:

290 SW 12TH AVE
SUITE 4
POMPANO BEACH, FL 33069 US

FEI Number: 65-0062269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLSWORTH, MARK ESQ
DOUMAR, ALLWORTH, PT AL
1177 SE THIRD AVE
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: PASD () Delete
Name: NOVAK, KENNETH E
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069

Title: VSTD () Delete
Name: BARRETT, SCOTT A
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: BARKER, ART
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: PERLOFF, JOHN
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PASD (X) Change () Addition
Name: NOVAK, KENNETH E
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VSTD (X) Change () Addition
Name: BARRETT, SCOTT A
Address: 290 SW 12TH AVE #4
City-St-Zip: POMPANO BEACH, FL 33069 US

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 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: KENNETH E. NOVAK

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date