

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M96494

FILED
Jan 05, 2004
Secretary of State

Entity Name: ACORN MORTGAGE CORP.

Current Principal Place of Business:

625 E. MERRITT AVE
SUITE M
MERRITT ISLAND, FL 329533483

New Principal Place of Business:

Current Mailing Address:

625 E. MERRITT AVE
SUITE M
MERRITT ISLAND, FL 329533483

New Mailing Address:

FEI Number: 59-2905214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMELIN, GEORGE
45 MCLEOD STREET #3
MERRITT ISLAND, FL 32953 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: DP () Delete
Name: GEROUX, ROXANNE A.,
Address: 2057 MONA CT
City-St-Zip: MERRITT ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GEROUX, ROXANNE A.,
Address: 2075 MONA CT
City-St-Zip: MERRITT ISLAND, FL 32952 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROXANNE A GEROUX

PRES

01/05/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date