## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N19952

FILED May 01, 2004 Secretary of State

Entity Name: FLORIDA ASSOCIATION OF MORTGAGE BROKERS - PALM BEACHES CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

17725 84TH CT N

LOXAHATCHEE, FL 33470 US

Current Mailing Address: New Mailing Address:

PO BOX 6477

TALLAHASSE, FL 323146477 US

FEI Number: 65-0079632 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WONDELL SMITH, KAREN 1292 CEDAR CENTER DR TALLAHASSEE, FL 32301

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:

OKL. \_\_\_\_\_

Electronic Signature of Registered Agent

US

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 D (X) Change () Addition

 Name:
 MERKARSKI, JOLEEN
 Name:
 MERKARSKI, JOLEEN

 Address:
 600 W HILLSBORO BLVD #515
 Address:
 600 W HILLSBORO BLVD #515

 City-St-Zip:
 DEERFIELD BEACH, FL 33441
 City-St-Zip:
 DEERFIELD BEACH, FL 33441

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 VAUGHN, NANCY
 Name:

 Address:
 PO BOX 19352
 Address:

 City-St-Zip:
 W.P.B., FL 334169352
 City-St-Zip:

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 MALCHOW, GAIL
 Name:
 MALCHOW, GAIL

 Address:
 2019 20TH LANE
 2019 20TH LANE

 City-St-Zip:
 LAKE WORTH, FL 33463
 City-St-Zip:
 LAKE WORTH, FL 33463

Title: PED ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 HARMON, MONICA
 Name:
 HARMON, MONICA

 Address:
 909 NE 7TH AVE.
 Address:
 909 NE 7TH AVE.

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:
 DELRAY BEACH, FL 33483

Title: M () Delete Title: PEM (X) Change () Addition Name: ROGERS, KELLY Name: ROGERS, KELLY Address: 17725 84TH CT N Address: 17725 84TH CT N

 Address:
 17725 84TH CT N
 Address:
 17725 84TH CT N

 City-St-Zip:
 LOXAHATCHEE, FL 33470
 City-St-Zip:
 LOXAHATCHEE, FL 33470

Title: VPD ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 HOPPER, TIM
 Name:
 DONAHUE, FRANK

 Address:
 5080 HEAVEN HILL LANE #5
 Address:
 PO BOX 1426

City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: LOXAHATCHEE, FL 33470

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KELLY ROGERS PEM 05/01/2004