2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22026

FILED Jan 21, 2004 Secretary of State

Entity Name: BREVARD CHAPTER OF THE FLORIDA ASSOCIATION OF MORTGAGE BROKERS, INC.

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

6767 N WICKHAM RD 1980 N ATLANTIC AVE

STE 400 STE 511

MELBOURNE, FL 32940 US COCOA BEACH, FL 32931 US

Current Mailing Address: New Mailing Address:

1520 N WICKHAM RD 1980 N ATLANTIC AVE

MELBOURNE, FL 32935 US STE 511 COCOA BEACH, FL 32931

FEI Number: 59-3124070 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:

WORDELL-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:

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Electronic Signature of Registered Agent

US

Date

US

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PED (X) Change () Addition Name: MAREK, PAUL M Name: PFANN, LAURA K

 Address:
 6767 N WICKHAM STE 400
 Address:
 1250 GRAND CAYMAN DR

 City-St-Zip:
 MELBOURNE, FL 32940
 City-St-Zip:
 MERRITT ISLAND, FL 32952

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

Name: TURLA, JON Name: TURLA, JON

 Address:
 200 BREVARD AVE
 Address:
 1980 N ATLANTIC AVE STE 511

 City-St-Zip:
 COCOA, FL 32922
 City-St-Zip:
 COCOA, FL 32922

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

 Name:
 REECE, PAUL W
 Name:
 REECE, PAUL W

 Address:
 1520 N WICKHAM ROAD
 Address:
 1520 N WICKHAM ROAD

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:
 MELBOURNE, FL 32935

Title: T () Delete Title: () Change () Addition

 Name:
 WEST MORELAND, KIM
 Name:

 Address:
 96 WILLARD STREET
 Address:

 City-St-Zip:
 COCOA, FL 32922
 City-St-Zip:

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: JON TURLA P 01/21/2004