

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000066947

1. Entity Name
PEOPLE'S HOME MORTGAGE INC.



Principal Place of Business
11328-2 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33411

Mailing Address
11328-2 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33411



03092005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1024934

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PAGANELLO, GARY
16887 WEST GLASGOW DRIVE
LOXAHATCHEE, FL 33470

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
PAGANELLO, MARLENE A
16887 WEST GLASGOW DRIVE
LOXAHATCHEE, FL 33470

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
PAGANELLO, GARY
16887 WEST GLASGOW DRIVE
LOXAHATCHEE, FL 33470

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
ST
PAGANELLO, MARLENE A
16887 WEST GLASGOW DRIVE
LOXAHATCHEE, FL 33470

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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03/21/05-80035-023 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marlene Paganello* MARLENE A. PAGANELLO 3/17/05 561-333-2223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #