

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003917

FILED
Apr 19, 2004
Secretary of State

Entity Name: BEACHSIDE MORTGAGE GROUP, INC.

Current Principal Place of Business:

6865 SW 18TH STREET
#11
BOCA RATON, FL 33433 US

Current Mailing Address:

6865 SW 18TH STREET
#11
BOCA RATON, FL 33433 US

New Principal Place of Business:

2385 EXECUTIVE CENTER DRIVE
SUITE 100
BOCA RATON, FL 33431 US

New Mailing Address:

5649 BOCA CHICA LANE
BOCA RATON, FL 33433 US

FEI Number: 65-1070831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, KRISTEN
6865 SW 18TH ST #11
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

JOHNSON, KRISTEN
5649 BOCA CHICA LANE
BOCA RATON, FL 33433 US

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:

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: JOHNSON, KRISTEN M
Address: 6865 SW 18TH ST #11
City-St-Zip: BOCA RATON, FL 33433

Title: DV () Delete
Name: GEIB, JUDI A
Address: 6865 SW 18TH ST #11
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: JOHNSON, KRISTEN M
Address: 2385 EXECUTIVE CENTER DRIVE #100
City-St-Zip: BOCA RATON, FL 33431

Title: DV (X) Change () Addition
Name: GEIB, JUDI A
Address: 2385 EXECUTIVE CENTER DRIVE #100
City-St-Zip: BOCA RATON, FL 33431

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: KRISTEN JOHNSON

DPS

04/19/2004

Electronic Signature of Signing Officer or Director

Date