2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000008772

Address:

City-St-Zip:

Entity Name: STUART MORTGAGE CORPORATION

FILED Apr 07, 2004 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
900 E. OCEAN BLVD STE 232 STUART, FL 34996				789 S FEDERAL HWY SUITE 206 STUART, FL 34994			
Current Mailing Address:				New Mailing Address:			
900 E. OCEAN BLVD STE 232 STUART, FL 34996				789 S FEDERAL HWY SUITE 206 STUART, FL 34994			
FEI Number:	: 37-1753294	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
STONE, JOHN T 1086 MAGNOLIA BLUFF DR PALM CITY, FL 34990 US				STONE, JOHN T 2338 SW HERONWOOD RD PALM CITY, FL 34990 US			
	named entity e of Florida.	submits this statement for the p	urpose o	f changing it	s registere	ed office or registered agent, or both,	
SIGNATURE:				04/07/2004			
	Electro	nic Signature of Registered Age	nt			Date	
Election Car	npaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D (STONE, JOHN 2338 SW HER PLAM CITY, FL	DNWOOD RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:		() Change (X) Addition N, ROBERT 61 TERRACE D, FL 33067	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	144 SEMIN	() Change (X) Addition , BOBBY JR. IOLE LAKES DR LM BEACH, FL 33411	
Title: Name:	() Delete		Title: Name:	D KENNEDY.	() Change (X) Addition ROBERT N	

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.

Address:

City-St-Zip:

3813 S OCEAN DR

HIGHLAND BEACH, FL 33487

SIGNATURE: JOHN T. STONE D 04/07/2004