2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005
Secretary of State

DOCUMENT# P01000008772

Entity Name: STUART MORTGAGE CORPORATION

Current Principal Place of Business:

789 S FEDERAL HWY
SUITE 206
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

789 S FEDERAL HWY
SUITE 206
STUART, FL 34994

New Mailing Address:

FEI Number: 37-1753294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONE, JOHN T
2338 SW HERONWOOD RD
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

STONE, JOHN T
9506 CROOKED STICK LANE
PORT ST. LUCIE, FL 34986 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: 02/24/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STONE, JOHN T
Address: 2338 SW HER0NWOOD RD
City-St-Zip: PLAM CITY, FL 34990

Title: D ( ) Delete
Name: TRAUTMAN, ROBERT
Address: 7804 NW 61 TERRACE
City-St-Zip: PARKLAND, FL 33067

Title: D ( ) Delete
Name: GAUTHIER, BOBBY JR.
Address: 144 SEMINOLE LAKES DR
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D ( ) Delete
Name: KENNEDY, ROBERT N
Address: 3813 S OCEAN DR
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: STONE, JOHN T
Address: 9506 CROOKED STICK LANE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: GAUTHIER, BOBBY JR.
Address: 202 NE FLAX TERR
City-St-Zip: JENSEN BEACH, FL 34957

Title: ( ) Change ( ) Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN T. STONE PRES 02/24/2005
Electronic Signature of Signing Officer or Director — Date