

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084309

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: AMERICAN RESIDENTIAL MORTGAGE, INC.

## Current Principal Place of Business:

801 WEST BAY DRIVE  
SUITE 501  
LARGO, FL 33770

## New Principal Place of Business:

801 WEST BAY DRIVE  
SUITE 501  
LARGO, FL 33770 US

## Current Mailing Address:

801 WEST BAY DRIVE  
SUITE 501  
LARGO, FL 33770

## New Mailing Address:

P.O. BOX 1309  
LARGO, FL 33779 US

FEI Number: 59-3739912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEREZ, DORCA  
801 WEST BAY DR  
501  
LARGO, FL 33770 US

## Name and Address of New Registered Agent:

PEREZ, CINDY L SEC  
801 WEST BAY DR  
501  
LARGO, FL 33770 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: CINDY L. PEREZ

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: VALLE-SUAREZ, GLADYS T  
Address: 801 WEST BAY DRIVE SUITE 501  
City-St-Zip: LARGO, FL 33770

Title: SEC ( ) Delete  
Name: PEREZ, DORCA  
Address: 801 WEST BAY DR, STE-501  
City-St-Zip: LARGO, FL 33770

Title: VP ( ) Delete  
Name: CASTANO, MADAY  
Address: 801 WEST BAY DR, STE-501  
City-St-Zip: LARGO, FL 33770

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC (X) Change ( ) Addition  
Name: PEREZ, CINDY L SEC  
Address: 801 WEST BAY DR, STE-501  
City-St-Zip: LARGO, FL 33770

Title: VP (X) Change ( ) Addition  
Name: CASTANO, MADAY VP  
Address: 801 WEST BAY DR, STE-501  
City-St-Zip: LARGO, FL 33770

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: GLADYS T VALLE-SUAREZ

PSTD

04/26/2005

Electronic Signature of Signing Officer or Director

Date