2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000089023

Address:

City-St-Zip:

Entity Name: FLORIDA HOUSING AND MORTGAGE, INC.

FILED Apr 22, 2003 Secretary of State

Current Principal Place of Business:				New Prince	New Principal Place of Business:			
2425 EAS ⁻ SUITE 400	COMMERCIA	L BOULE	EVARD					
	JDERDALE, FL	33308	US					
Current M	ailing Addres	s:		New Maili	ng Address	:		
	COMMERCIA	L BOULE	EVARD					
SUITE 400 FORT LAU	ı JDERDALE, FL	33308	US					
FEI Number:	65-1136220	FEI Num	ber Applied For()	FEI Number Not App	licable ()	Certificate of Status Desi	red()	
Name and	Address of C	urrent Re	egistered Agent:	Name and	Address of	New Registered Agent	:	
2425 ÉAS ⁻ SUITE 400	CQUELINE COMMERCIA JDERDALE, FL							
	named entity s e of Florida.	ubmits th	is statement for the	purpose of changing i	ts registered	office or registered agen	t, or both,	
SIGNATU	RE:							
	Electroni	ic Signatu	ure of Registered Ag	jent		Date		
Election Car	npaign Financing	Trust Fun	d Contribution ().					
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PTD () DAVIS, JACQUE 2425 EAST COM FORT LAUDERI	/IMERCIAL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SEC () DAVIS, JACQUE 2425 EAST COM FORT LAUDERI	MERCIAL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	VP (DAVIS, MARII 57A GARRET BAYONNE, N	SON AVE		
Title:	()	Delete		Title:	TRES () Change (X) Addition		

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:

57A GARRETSON AVE

BAYONNE, NJ 07002

SIGNATURE: MARILYN DAVIS VP 04/22/2003