## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # P01000104357**

1. Entity Name D & J MORTGAGES, INC.



Principal Place of Business

630 BRIARWOOD LANE DEERFIELD BEACH, FL 33442 Mailing Address

**630 BRIARWOOD LANE** DEERFIELD BEACH, FL 33442

## **FILED** Mar 15, 2004 08:00 AM Secretary of State



03102004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1150130 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCGONIGLE, JACQUELINE 6221 BANYAN TERRACE PLANTATION, FL 33317

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

		į.			
3. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typod or posted dams of registered agent and title 4 applicable. (NOTE, Registered Agent agent agent agent and title 4 applicable.)  DATE					
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Finar Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINNOTT, JAMES 630 BRIARWOOD LANE DEERFIELD BEACH, FL 33442				U00000088995 03/15/04-80074-007 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SINNOTT, DOROTHY 630 BRIARWOOD LANE DEERFIELD BEACH, FL 33442				03/15/04-800/4-00/ 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE HAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					-
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					