## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000133407

FILED Apr 09, 2004 Secretary of State

Entity Name: THE HOME MORTGAGE GROUP OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2428 CYPRESS TRACE CR. ORLANDO, FL 32825 **Current Mailing Address: New Mailing Address:** 2428 CYPRESS TRACE CR. ORLANDO, FL 32825 FEI Number: 75-1541243 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEROUX, JULISSA N 2428 CYPRESS TRACE CR. ORLANDO, FL 32825 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition LEROUX, JULISSA N Name: Name: 2428 CYPRESS TRACE CR. Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: PTS Title: () Change () Addition () Delete Name: SELLES, VICTOR J Name: 2428 CYPRESS TRACE CR. Address: Address: ORLANDO, FL 32825 City-St-Zip: 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: JULISSA NICOLE LEROUX P 04/09/2004