2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2004
Secretary of State

DOCUMENT# P03000029217

Entity Name: METROPLEX MORTGAGE, INC.

Current Principal Place of Business:

3550 N ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

New Principal Place of Business:

201 PARK PLACE
205
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

3550 N ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

New Mailing Address:

POB 0456
ALTAMONTE SPRINGS, FL 32701

FEI Number: 06-1682538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERRING, CHARLES
3550 N ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

Name and Address of New Registered Agent:

RYAN, ROBERT
201 PARK PLACE
205
ALTAMONTE SPRINGS, FL 32701

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: ROBERT RYAN 04/18/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: HERRING, CHARLES
Address: 3550 N ORANGE BLOSSOM TRAIL
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: RYAN, ROBERT
Address: 201 PARK PLACE #205
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: ROBERT RYAN DPST 04/18/2004
Electronic Signature of Signing Officer or Director — Date