

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 8:00 am
Secretary of State

07-08-2004 90094 036 ***150.00

54060365



DOCUMENT # P03000031296 1. Entity Name LTAC MORTGAGE LENDERS, INC.				 L	
Principal Place of Business 1001 U.S. HIGHWAY ONE SUITE 206 JUPITER, FL 33477			Mailing Address 1001 U.S. HIGHWAY ONE SUITE 206 JUPITER, FL 33477		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 608-0545470	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: RT Cribb			Date: 6/30/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

Attachment

524060365-

LTAC MORTGAGE LENDERS, INC.

1001 U.S. Highway One
Suite 206
Jupiter, Florida 33477

June 30, 2004

Florida Department of State
Secretary of State
Glenda E. Hood
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: LTAC Mortgage Lenders Inc.
Document # P03000031296

To Whom It May Concern:

I have enclosed the Annual Report for LTAC Mortgage Lenders, Inc and a check in the amount of \$150.00. Please waive the \$400.00 late fee, as we did not receive the renewal form for this newly formed corporation.

If you should have questions please contact me at 561-746-0343.

Sincerely,


Rembert T. Cribb
President

Enclosures