2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000052222

Entity Name: CSJ MORTGAGE, INC.

21201 WHITE OAK AVENUE

BOCA RATON, FL 33428 US

Address: City-St-Zip: FILED Apr 22, 2008 Secretary of State

Littly Nan	ile. Cou MC	RTGAGE, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
5975 W. SUNRISE BLVD SUITE					
SUITE 208, SUNRISE,		US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	JNRISE BLVD			5975 W. SUNRISE BLVD SUITE	
208A SUNRISE,	FL 33313 US		SUITE 208A SUNRISE, FL 33313	US	
FEI Number:	20-0134723	FEI Number Applied For	() FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			nt: Name and Address o	Name and Address of New Registered Agent:	
21201 WHI	LE, JACQUI TE OAK AVE ON, FL, FL	ENUE			
The above in the State		submits this statement fo	or the purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	onic Signature of Register	ed Agent	Date	
Election Cam	npaign Financii	ng Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BAYARDELLE 21201 WHITE) Delete E, JACQUES E OAK AVENUE I, FL 33428 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BAYARDELLE 21201 WHITE) Delete E, CAROLE E E OAK AVENUE I, FL 33428 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SEC (BAYARDELLE) Delete E. JAMES C	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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:

SIGNATURE: JACQUES BAYARDELLE P 04/22/2008