

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132938

FILED  
Mar 03, 2004  
Secretary of State

Entity Name: 1ST AMERICAN MORTGAGE & INVESTMENT GROUP, INC.

## Current Principal Place of Business:

402 NE 12TH CT  
CAPE CORAL, FL 33909 US

## New Principal Place of Business:

811 SW 44TH ST  
SUITE 5  
CAPE CORAL, FL 33914 US

## Current Mailing Address:

402 NE 12TH CT  
CAPE CORAL, FL 33909 US

## New Mailing Address:

FEI Number: 13-4269754      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RALPH, CLAIRMONT  
402 NE 12TH CT  
CAPE CORAL, FL 33909 US

## Name and Address of New Registered Agent:

RALPH, CLAIRMONT  
811 SW 44TH ST  
SUITE 5  
CAPE CORAL, FL 33914 US

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: CLAIRMONT RALPH

03/03/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RALPH, CLAIRMONT  
Address: 402 NE 12TH CT  
City-St-Zip: CAPE CORAL, FL 33909 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: RALPH, CLAIRMONT  
Address: 402 NE 12TH CT  
City-St-Zip: CAPE CORAL, FL 33909 US

Title: P ( ) Change (X) Addition  
Name: HILTON, DOUGLAS  
Address: 2408 SW 39ST  
City-St-Zip: CAPE CORAL, FL 33914 US

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: CLAIRMONT RALPH

PRES

03/03/2004

Electronic Signature of Signing Officer or Director

Date