

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140035

FILED
Apr 29, 2004
Secretary of State

Entity Name: COMMERCIAL MORTGAGE LENDERS, INC.

Current Principal Place of Business:

2136 GULFGATE DR STE 7
SARASOTA, FL 34231

New Principal Place of Business:

1819 MAIN STREET
SUITE 1100
SARASOTA, FL 34236

Current Mailing Address:

2136 GULFGATE DR STE 7
SARASOTA, FL 34231

New Mailing Address:

1819 MAIN STREET
SUITE 1100
SARASOTA, FL 34236

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALLACK, MICHAEL M ESQ.
27 FLETCHER AVE
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

WALLACK, MICHAEL M ESQ.
1819 MAIN STREET
SUITE 1100
SARASOTA, FL 34236 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: MICHAEL M. WALLACK

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WALLACK, MICHAEL M
Address: 7510 MIDNIGHT PASS RD
City-St-Zip: SARASOTA, FL 34242

Title: DST () Delete
Name: KRAMER, DEBORAH L
Address: 7850 ALLEN ROBERTSON PL
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MICHAEL M. WALLACK

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date