## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 11, 2005 8:00 am **Secretary of State DOCUMENT # P04000136369** 02-02-2005 90066 023 \*\*\*158.75 1. Entity Name SUNCOAST MORTGAGE FUNDING INC. Principal Place of Business Mailing Address 4405 NW 28TH WAY BOCA RATON FL 33434 4405 NW 28TH WAY BOCA RATON FL 33434 66004561 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) City & State i City & State 4. FEI Number Applied For 20-1699041 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRUBY, DANNY Street Address (P.O. Box Number is Not Acceptable) 4405 NW 28TH WAY **BOCA RATON FL 33434** Zip Code 3. 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, typed or printed name of registrated agent and life 4 applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ■ Addition - Octob DDF ☐ Change GRUBY, DANNY NAME NAME STREET ADDRESS 4405 NW 28TH WAY STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33434** CITY-ST-212 Delete Change Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-ZIP UNE ☐ Change ☐ Addition TITLE ☐ Deteta NAME NAME STREET ADDRESS STREET ADDRESS CI1Y-S1-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS C/1Y-51-7/P CITY-S1-79P ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RUE □ Delete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CSTY-ST-ZIP 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 supplierital 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 gustee 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 tike/empowered.

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