2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000035270

Entity Name: SUBURBAN MORTGAGE SERVICE, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

760 US HWY ONE 12773 W. FOREST HILL BLVD.

204 1215

NORTH PALM BEACH, FL 33408 US WELLINGTON, FL 33414 US

Current Mailing Address: New Mailing Address:

760 US HWY ONE 12773 W. FOREST HILL BLVD.

NORTH PALM BEACH, FL 33408 US WELLINGTON, FL 33414 US

FEI Number: 65-0487448 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISHMAN, ROBERT FISHMAN, ROBERT 34000 PORTOFINO CIR. APT. 105 10285 TRIANON PL.

PALM BEACH GARDENS, FL 33418 US WELLINGTON, FL 33467 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: MITCHELL FISHMAN 04/20/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD () Delete Title: PTSD (X) Change () Addition Name: FISHMAN, ROBERT Name: FISHMAN, ROBERT

 Name:
 FISHMAN, ROBERT
 Name:
 FISHMAN, ROBERT

 Address:
 34000 PORTOFINO CIR. #105
 Address:
 10285 TRIANON PL.

 City-St-Zip:
 PALM BEACH GARDENS, FL 33418
 City-St-Zip:
 WELLINGTON, FL 33467

Title: VP () Delete Title: () Change () Addition

 Name:
 MITCHELL, FISHMAN S
 Name:

 Address:
 13632 83RD LANE NORTH
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33412
 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: MITCHELL FISHMAN VP 04/20/2005