2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P95000059443 1. Entity Name UNITED FIRST MORTGAGE USA, INC.								04	FILE		26	٠
Principal Place 11 GREEN L LONGWOOD,	ling Address GREEN LAKE CIRCL NGWOOD, FL 3227	EEN LAKE CIRCLE				CRETARY: Lahasse			1 3 0 5 15 1 0 0 1			
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.			Si	Suite, Apt. #, etc.				06212004	Chg-P	CR2E	E034 (10/03)	
City & State			С	City & State				4. FEI Numb 59-333		•	}+-	plied For t Applicable
Zip	i	Country -	Zi	p	Coun	itry		5. Certificate	of Status Desired	d 🔲	\$8.75 Add Fee Required	
6. Name and Address of Current Registered Agent								7. Name and	Address of Nev	v Registered	i Agent	
HUMPHRIES, J. GREGORY 300 S ORANGE AVE STE 1000 ORLANDO, FL 32801					Jeffrey M. Koltun Street Address (P.O. Box Number is Not Acceptable) 557 North Wymore Road Suite 100							
(10						City				F	Zip Code 3 2 7 5	 1
8. The above named entity submits this scatterment of 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 Signature, toold at printing name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE												
9. Election Campaign Finan Trust Fund Contribution.							\$5. ! Adde	00 May Be ed to Fees				
10. TITLE	DPTS	OFFICERS AN	ID DIRECT	FORS	11.	: I		ADDITIONS	CHANGES TO C	FFICERS AN	ND DIRECTORS Change	IN 11
NAME STREET ADDRESS CITY-ST-ZIP	UNGARO	, JAMES J N LAKE CIRCLE OOD, FL		La Delete	NAM STRE						Change	Addition
TITLE NAME	VAS	, GEORGIANA		☐ Delete	TITLE NAM						☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	!	N LAKE CIRCLE			ET ADORESS - ST-ZIP		300039084123 07/14/0401007001 **122.50				50	
TITLE NAME				☐ Delete	TITLE						☐ Change	☐ Addition
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STREET ADDRESS	3				STRE	ET ADDRESS - ST-ZIP						
TITLE .				☐ Delete	TITU NAM						☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP						
TITLE NAME				Delete	TITLE						☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP					STRE	ET ADDRESS -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 of supplied ental 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 on the receiver or trustee 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 like empowered.												
James J. Ungaro, President 6/21/04 407-862-4842												
		SIGNATURE AND TYPER C	R PRINTED N	IAME OF SIGNING OFFICER	OR DIRECT	TOR			Date		Daytime Phone #	