
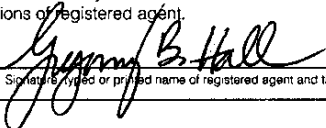
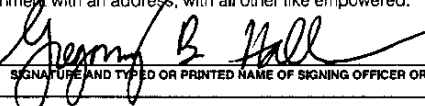


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90309 036 ***150.00

DOCUMENT # P95000085100 1. Entity Name REAL ESTATE MORTGAGE PROFESSIONALS, INC.			
* Principal Place of Business 610 SOUTH MAITLAND AVENUE MAITLAND, FL 32751		Mailing Address 610 SOUTH MAITLAND AVENUE MAITLAND, FL 32751	
2. Principal Place of Business 471 N. MAITLAND AVENUE <small>Suite, Apt. #, etc.</small>		3. Mailing Address 471 N. MAITLAND AVENUE <small>Suite, Apt. #, etc.</small>	
City & State MAITLAND, FL 32751 <small>Zip Country</small> 32751 USA		City & State MAITLAND, FL 32751 <small>Zip Country</small> 32751 USA	
4. FEI Number 59-3344303		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HALL, GREGORY B 610 S. MAITLAND AVE MAITLAND, FL 32751		7. Name and Address of New Registered Agent Name HALL, GREGORY B. Street Address (P.O. Box Number is Not Acceptable) 471 N. MAITLAND AVE. City MAITLAND FL Zip Code 32751	
8. 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  GREGORY B. HALL 4/22/05 DATE <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D/P BRUNER, TERRY A 610 S. MAITLAND MAITLAND, FL 32751	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DECEASED	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DSTV HALL, GREGORY B 610 S. MAITLAND MAITLAND, FL 32751	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 471 N. MAITLAND AVE MAITLAND, FL 32751	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP DA PRES. MENCIS, CHRISTOPHER J. 610 S. MAITLAND MAITLAND, FL 32751	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT 471 N. MAITLAND AVE MAITLAND, FL 32751	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 supplemental 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 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.			
SIGNATURE:  GREGORY B. HALL <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/22/05 407 629-8808 <small>Date Daytime Phone #</small>	

40068923



01072005 Chg-P CR2E034 (10/03)