2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021542

Entity Name: UST MORTGAGE COMPANY

FILED Apr 20, 2004 Secretary of State

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Current Principal Place of Business:			N	New Principal Place of Business:		
190 CONG	SS PARK NOF BRESS PARK BEACH, FL 33	DRIVE, SUITE 100				
Current Mailing Address:			N	New Mailing Address:		
190 CONG	SS PARK NOF BRESS PARK BEACH, FL 33	DRIVE, SUITE 100				
FEI Number:	65-0649747	FEI Number Applied For ()	FEI Numbe	er Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	N	ame and	Address of New Registered Agent:	
190 CONG SUITE 100	WSKI, STANI RESS PARK BEACH, FL 33	DRIVE				
The above in the State	named entity of Florida.	submits this statement for the p	ourpose of cl	hanging i	ts registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	A	DDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	,		Na Ad	ile: ame: ldress: ty-St-Zip:	PD (X) Change () Addition BRESSOUD, DONALD 190 CONGRESS PARK DRIVE SUITE 100 DELRAY BEACH, FL 33445	
Title: Name: Address: City-St-Zip:	MATUSZEWSI	SS PARK DRIVE SUITE 100	Na Ad	ile: ame: ldress: ty-St-Zip:	D (X) Change () Addition MATUSZEWSKI, STANLEY 190 CONGRESS PARK DRIVE SUITE 100 DELRAY BEACH, FL 33445	
Title: Name: Address: City-St-Zip:	SD (DOWLING, JA 132 ROYAL PA PALM BEACH,	ALM WAY	Na Ad	ile: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GUARIGLIA, S	SS PARK DRIVE STE 100	Na Ad	lle: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BUSTER, STE	R ST, SUITE 2700	Na Ad	ile: ame: ldress: ty-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CHILDS, ALFR	/E, SUITE 2700	Na Ad	ile: ame: ldress: ty-St-Zip:	() Change () Addition	

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: STANLEY MATUSZEWSKI SVP 04/20/2004

THOMAS C. CLARK, DIRECTOR ONE PICKWICK PLAZA GREENWICH, CT 06830