

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105040

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: STATEWIDE MORTGAGE OUTLET, INC.

## Current Principal Place of Business:

8921 W ATLANTIC BLVD  
M  
CORAL SPRINGS, FL 33071 US

## Current Mailing Address:

8921 W ATLANTIC BLVD  
M  
CORAL SPRINGS, FL 33071 US

## New Principal Place of Business:

1515 UNIVERSITY DR  
216  
CORAL SPRINGS, FL 33071 US

## New Mailing Address:

1515 UNIVERSITY DR  
216  
CORAL SPRINGS, FL 33071 US

FEI Number: 65-0800043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STOTT, ROBERT S  
8921 W ATLANTIC BLVD  
M  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

STOTT, ROBERT S  
1515 UNIVERSITY DR  
216  
CORAL SPRINGS, FL 33071 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:

04/13/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: STOTT, ROBERT S  
Address: 9920 NW 11 ST  
City-St-Zip: PLANTATION, FL 33322

Title: VP ( ) Delete  
Name: LEHMAN, JUANNE  
Address: 8921 W. ATLANTIC BLVD., #M  
City-St-Zip: CORAL SPRINGS, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: STOTT, ROBERT S  
Address: 1461 NW 114 AVE  
City-St-Zip: PLANTATION, FL 33323

Title: VP (X) Change ( ) Addition  
Name: LEHMAN, JOANNE  
Address: 1515 UNIVERSITY DR, #216  
City-St-Zip: CORAL SPRINGS, FL 33071

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: ROBERT S. STOTT

P

04/13/2005

Electronic Signature of Signing Officer or Director

Date