

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000029028

FILED
Feb 18, 2004
Secretary of State

Entity Name: CAPITAL HOME MORTGAGE OF DUVAL INC.

Current Principal Place of Business:

5836 RICHARD ST.
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

5836 RICHARD ST.
JACKSONVILLE, FL 32216 US

New Mailing Address:

5000 SAN JOSE BLVD.
#66
JACKSONVILLE, FL 32207 US

FEI Number: 52-2089815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT H
5836 RICHARD STREET
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

WILLIAMS, ROBERT H
5000 SAN JOSE BLVD.
#66
JACKSONVILLE, FL 32207 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: ROBERT H. WILLIAMS

02/18/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILLIAMS, ROBERT H
Address: 5836 RICHARD ST.
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, ROBERT H
Address: 5000 SAN JOSE BLVD. #66
City-St-Zip: JACKSONVILLE, FL 32207

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 H. WILLIAMS

D

02/18/2004

Electronic Signature of Signing Officer or Director

Date