


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 21, 2005 8:00 am**  
**Secretary of State**

04-21-2005 90242 012 \*\*\*150.00

<b>DOCUMENT # P99000002408</b> 1. Entity Name <b>TOHO MORTGAGE CORPORATION</b>	
--	---

Principal Place of Business <b>3600 VINELAND ROAD SUITE 101 ORLANDO, FL 32811</b>	Mailing Address <b>3600 VINELAND ROAD SUITE 101 ORLANDO, FL 32811</b>
--	--

**40064786**



04062005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>59-3556886</b>	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
---	---------------------------------------

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  <b>BARKER, EARL M JR SLOTT &amp; BARKER 334 E DUVAL ST JACKSONVILLE, FL 32202-2718</b>
---

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD WEBB, DANIEL B 3600 VINELAND RD STE 101 ORLANDO, FL 32811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BARKER, EARL M JR 334 E DUVAL ST JACKSONVILLE, FL 32202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WEBB, WILLIAM C JR 1300 NW 167TH ST MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Earl M. Barker, Jr.**

Date

Daytime Phone #

**4/13/05 (904) 353-0033**