2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 15, 2004 8:00 am Secretary of State 01-15-2004 90005 045 ***158.75

### Address of Business ### BOCA RATON, FL 33431 ### Applies of Country ### C	DOCUMENT # P9900008369 1. Entity Name THE AFFINITY MORTGAGE GROUP, INC.					01-15-2004 90005 045 ***158.75				
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City & State City & State City & State City & State Country S. Certificate of Status Digited S. R. Additional For Registered Agent Name Name Name Name Street Address of New Registered Agent Street Address of New Registered Agent City FL Zip Code City FL Zip Cod	2. Principal Place of Business 3. Mailing Address					i .				
Septembrook	Suite, Apt. #, etc. Suite, Apt. #, etc.					01122004	Chg-P	CR2E034	(10/03)	
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RUSSO, ROBERT M 1900 CORPORATE BLVD., SUITE 400 EAST 8. The abboton named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 8. The abboton named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 8. The abboton provided protects have of registered agent and title if assistant agent a		6. Name and Address of Current	Registered Agent		Namo	7. Name and	Address of New	Registered Age	ent	
Sinest Address (P.O. Box Number is Not Acceptable) City FL Zip Code	RUSSO, ROBERT M				Name .					
B. Theabbove named onlity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE SIGNATURE SIGNATURE FILE NOWIII FEE IS \$150,00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Trust Fund Contribution. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE PD Added to Pees PRUSSO, ROBERT M 1900 CORPORATE BLVD., SUITE 400 EAST SIREST ADDRESS CITY-ST-2P TILE NAME SIREST ADDRESS CITY-ST-2P TI	1900 COR	RPORATE BLVD., SUITE 400 E	ļ	Street Address (P.O. Box Number is Not Acceptable)						
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SIGNATURE Signature. Injusted or printed name af registered agent and late if applicable. (HOTE: Registered Agent sonature or regi	,	,		City			FL	Zip Code	•	
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### After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution Added to Fees		Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Hegistered	Agent signature required	when reinstating)		DATE	1 21 1	
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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		L:								
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 path; 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 phage propagated.										