2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000045395

Entity Name: SUNCOAST MORTGAGE LOANS, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

1342 COLONIAL BLVD **BUILDING K SUITE 114** FORT MYERS, FL 33907

New Mailing Address: Current Mailing Address:

1342 COLONIAL BLVD **BUILDING K SUITE 114** FORT MYERS, FL 33907

FEI Number: 62-1780256 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEL BARTO, ANTHONY J DEL BARTO, ANTHONY J 521 SW 47TH TR #105 1613 SW 43RD STREET CAPE CORAL, FL 33914 CAPE CORAL, FL 33914

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: 04/30/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DEL BARTO, ANTHONY J DEL BARTO, ANTHONY J Name: Name: 521 SW 47TH TR #105 1613 SW 43RD STREET Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33914

() Delete Title: DT Title: (X) Change () Addition Name: DEL BARTO, CHRISTINA M Name: DEL BARTO, CHRISTINA M 521 SW 47TH TR #105 Address: 1613 SW 43RD STREET Address:

CAPE CORAL, FL 33914 CAPE CORAL, FL 33914 City-St-Zip:

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: ANTHONY J. DEL BARTO **DPS** 04/30/2004