

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G53682

**FILED**  
**Feb 14, 2019**  
**Secretary of State**  
**1224090135CC**

**Entity Name:** FIRST PARTNERSHIP MORTGAGE CORPORATION

**Current Principal Place of Business:**

4700 EXCHANGE COURT  
SUITE 300  
BOCA RATON, FL 33431

**Current Mailing Address:**

P O BOX 551540  
FT LAUDERDALE, FL 33355 US

**FEI Number:** 59-2349385

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERTY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title DVP  
Name WARD, MARGARET L  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title P  
Name OUTRAM, RAMESH K  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title ST  
Name WARD, MARGARET G  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title D  
Name OUTRAM, RAMESH D  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title D  
Name WOLK, HOWARD L.  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

Title CEO  
Name WARD, MARGARET E  
Address 4700 EXCHANGE COURT  
SUITE 300  
City-State-Zip: BOCA RATON FL 33431

*I hereby 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 all other like empowered.*

**SIGNATURE:** MARGARET WARD

**TREASURER**

**02/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date