

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002854

FILED  
Mar 19, 2009  
Secretary of State

Entity Name: IDEAL MORTGAGE BANKERS, LTD. INC.

**Current Principal Place of Business:**

201 OLD COUNTRY ROAD  
MELVILLE, NY 11747

**New Principal Place of Business:**

520 BROADHOLLOW ROAD  
MELVILLE, NY 11747

**Current Mailing Address:**

201 OLD COUNTRY ROAD  
MELVILLE, NY 11747

**New Mailing Address:**

520 BROADHOLLOW ROAD  
MELVILLE, NY 11747

FEI Number: 11-2683197

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: PRIMEAU, MICHAEL  
Address: 11 ELM STREET  
City-St-Zip: LYNBROOK, NY 11563

Title: SV ( ) Delete  
Name: DECILLIS, HELENE  
Address: 6 NORRRIS LANE  
City-St-Zip: WOODBURY, NY 11797

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: PRIMEAU, MICHAEL  
Address: 564 15TH STREET  
City-St-Zip: WEST BABYLON, NY 11704

Title: SV (X) Change ( ) Addition  
Name: DECILLIS, HELENE  
Address: 6 NORRRIS LANE  
City-St-Zip: EAST SETAUKET, NY 11797

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MICHAEL PRIMEAU

PRES

03/19/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date