

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001460

**FILED**  
**Jan 10, 2006**  
**Secretary of State**

**Entity Name:** BLACK RIVER MORTGAGE COMPANY, INC.

**Current Principal Place of Business:**

415 ROUT 24  
CHESTER, NJ 07930

**New Principal Place of Business:**

415 ROUTE 24  
CHESTER, NJ 07930

**Current Mailing Address:**

415 ROUT 24  
CHESTER, NJ 07930

**New Mailing Address:**

415 ROUTE 24  
CHESTER, NJ 07930

**FEI Number:** 22-3634576

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STYERS, JESSICA ANN  
3118 SEA MARSH ROAD  
AMELIA ISLAND, FL 32034 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: CP ( ) Delete  
Name: DAVIS, ROBERT L  
Address: 4 SWAYZE LANE  
City-St-Zip: CHESTER, NJ 07930

Title: VST ( ) Delete  
Name: DAVIS, MANY LOUISE  
Address: 4 SWAYZE LANE  
City-St-Zip: CHESTER, NJ 07930

Title: V ( ) Delete  
Name: LEARY, GERARD  
Address: 152 SANDFORD AVE.  
City-St-Zip: NORTH PLAINFIELD, NJ 07060

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VST (X) Change ( ) Addition  
Name: DAVIS, MARY LOUISE  
Address: 4 SWAYZE LANE  
City-St-Zip: CHESTER, NJ 07930

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT L. DAVIS

CP

01/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date