


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 09, 2006 8:00 am**  
**Secretary of State**

03-09-2006 90150 033 \*\*\*150.00

<b>DOCUMENT # F05000007350</b>	
1. Entity Name HAMPTON BAY MORTGAGE COMPANY, INC.	

Principal Place of Business ONE STILES ROAD, SUITE 102 SALEM, NH 03079	Mailing Address ONE STILES ROAD, SUITE 102 SALEM, NH 03079
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4002699Z



2. Principal Place of Business One Stiles Road	3. Mailing Address One Stiles Road
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Suite, Apt. #, etc. Suite 106	Suite, Apt. #, etc. Suite 106
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City & State Salem, NH	City & State Salem, NH
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Zip 03079	Country USA	Zip 03079	Country USA
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03062006 Chg-P CR2E034 (11/05)

4. FEI Number 02-0518496	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PRATT, RANDALL L 135 RICHARDS AVENUE PORTSMOUTH, NH 03801 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Randall L Pratt* Date: 3/8/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #



ATTACHMENT

46026992  
#FD5000007350

## Hampton Bay Mortgage Company, Inc.

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Licensed by the New Hampshire Banking Department  
MA Mortgage Broker License No. MB2250  
Maine Mortgage Broker Registration No. CS05743

One Stiles Road, Suite 106  
Salem, NH 03079  
(603) 894-1119  
Fax (603) 894-1211  
Toll Free (888) 369-0026

March 6, 2006

Division of Corporations  
2670 Executive Center Circle  
Suite 100  
Tallahassee FL 32301


Re: 2006 For Profit Corporation Annual Report

Dear Sir or Madam:

Enclosed please find Hampton Bay Mortgage Company, Inc. 2006 For Profit Corporation Annual Report. Also enclosed is a check for \$150.00.

If you have any questions, please call me at this office.

Very truly yours,

  
Fred Thompson  
Operations Manager