

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006045

FILED  
Jul 09, 2004  
Secretary of State

Entity Name: MORTGAGES UNLIMITED SOUTH, INC.

## Current Principal Place of Business:

13601 80TH CIRCLE N., SUITE 150  
MAPLE GROVE, MN 55369

## New Principal Place of Business:

7270 FORESTVIEW LANE NORTH  
SUITE 150  
MAPLE GROVE, MN 55369

## Current Mailing Address:

13601 80TH CIRCLE N., SUITE 150  
MAPLE GROVE, MN 55369

## New Mailing Address:

7270 FORESTVIEW LANE NORTH  
SUITE 150  
MAPLE GROVE, MN 55369

FEI Number: 41-1718186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOLMERS, TODD  
28303 HIDDEN LAKE DRIVE  
BONITA SPRINGS, FL 34134 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: BENINCASA, JAMES  
Address: 13601 80TH CIRCLE N., SUITE 150  
City-St-Zip: MAPLE GROVE, MN 55369

Title: VCS ( ) Delete  
Name: BENINCASA, JODY  
Address: 13601 80TH CIRCLE N., SUITE 150  
City-St-Zip: MAPLE GROVE, MN 55369

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: BENINCASA, JAMES  
Address: 7270 FORESTVIEW LANE NORTH, #150  
City-St-Zip: MAPLE GROVE, MN 55369

Title: VCS (X) Change ( ) Addition  
Name: BENINCASA, JODY  
Address: 7270 FORESTVIEW LANE NORTH, #150  
City-St-Zip: MAPLE GROVE, MN 55369

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: JODY BENINCASA

VCS

07/09/2004

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

\_\_\_\_\_ Date