

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001711

FILED
Jan 14, 2008
Secretary of State

Entity Name: WALKER JACKSON MORTGAGE CORPORATION

Current Principal Place of Business:

11351 RANDOM HILLS ROAD
FAIRFAX, VA 22030

New Principal Place of Business:

Current Mailing Address:

4440 BROOKFIELD CORPORATE CENTER DRIVE
SUITE 300
CHANTILLY, VA 20151

New Mailing Address:

FEI Number: 54-1242685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
STE 4
WESTON, FL 33331 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: P () Delete
Name: STEVENS, DAVID H
Address: 11351 RANDOM HILLS RD
City-St-Zip: FAIRFAX, VA 22030

Title: VP () Delete
Name: WEDDLE, MARY K
Address: 11351 RANDOM HILLS RD
City-St-Zip: FAIRFAX, VA 22030

Title: T () Delete
Name: ENGER, BRUCE L
Address: 11351 RANDOM HILLS RD
City-St-Zip: FAIRFAX, VA 22030

Title: S () Delete
Name: DETROY, ELIZABETH
Address: 4440 BROOKFIELD CORPORATE CENTER DR #300
City-St-Zip: CHANTILLY, VA 20151

Title: AT () Delete
Name: HARRIS, DAVID A
Address: 1000 URBAN CENTER DR, SUITE 500
City-St-Zip: BIRMINGHAM, AL 35242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: ELIZABETH DETROY

S

01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date