


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
05 JUN 21 PM 2:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96680 1. Entity Name MMA MORTGAGE INVESTMENT CORPORATION	
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Principal Place of Business 33 N GARDEN AVENUE, STE. 1200 CLEARWATER, FL 33755 US	Mailing Address 621 EAST PRATT STREET SUITE 300 BALTIMORE, MD 21202
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DO NOT WRITE IN THIS SPACE



06202005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2293233	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEMS
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE	P
NAME	FALCONE, MICHAEL L
STREET ADDRESS	621 EAST PRATT STREET, SUITE 300
CITY-ST-ZIP	BALTIMORE, MD 21202
TITLE	S
NAME	GIBSON, SHEILA
STREET ADDRESS	621 EAST PRATT STREET, SUITE 300
CITY-ST-ZIP	BALTIMORE, MD 21202
TITLE	EV
NAME	HARRISON, WILLIAM S
STREET ADDRESS	621 EAST PRATT STREET, SUITE 300
CITY-ST-ZIP	BALTIMORE, MD 21202
TITLE	SV
NAME	MCHUGH, JANET
STREET ADDRESS	621 EAST PRATT STREET, SUITE 300
CITY-ST-ZIP	BALTIMORE, MD 21202
TITLE	EV
NAME	COLE, EARL W III
STREET ADDRESS	218 N. CHARLES STREET, STE. 500
CITY-ST-ZIP	BALTIMORE, MD 21201
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: Michael Falcone Michael Falcone 6-20-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #