## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F9900000646

Entity Name: SECURITYNATIONAL MORTGAGE COMPANY

FILED Apr 01, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
5300 SOUTH 360 WEST SUITE 150 SALT LAKE CITY, UT 84123							
Current Mailing Address:				New Mailing Address:			
PO BOX 57250 100 SALT LAKE CITY, UT 841570250				5300 SOUTH 360 WEST SUITE 150 SALT LAKE CITY, UT 84123			
FEI Number: 87-0512002 FEI Number Applied For ( ) FEI Number			FEI Num	nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
SILL, GARRETT S 755 RINEHART RD #100 LAKE MARY, FL 32746 US							
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CDT () C QUIST, SCOTT M 7 WANDERWOO SANDY, UT 8409	D WAY		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion
Title: Name: Address: City-St-Zip:	D () C QUIST, GEORGE 4491 WANDER L SALT LAKE CITY	ANE		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion
Title: Name: Address: City-St-Zip:	D () C CRITTENDEN, CH 2334 FILMORE A OGDEN, UT 8440	VE.		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion
Title: Name: Address: City-St-Zip:	D () C MOODY, HOWAR 1782 EAST FAUN SANDY, UT 8409	ISDALE DRIVE		Title: Name: Address: City-St-Zip:	MOODY, HO	OOKGLEN DR	tion
Title: Name: Address: City-St-Zip:	D () D HUNTER, ROBER #2 RAVENWOOD SANDY, UT 8409	LANE		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion
Title: Name: Address: City-St-Zip:	D () E BECKSTEAD, J. I 190 NORTH MAT ALPINE, UT 8400	TERHORN DR.		Title: Name: Address: City-St-Zip:		()Change ()Addi	tion

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: J. LYNN BECKSTEAD D 04/01/2008