

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000111269

FILED
May 25, 2009
Secretary of State

Entity Name: MORTGAGE PROFESSIONALS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

602 W 27TH ST
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

PO BOX 950369
LAKE MARY, FL 327950369

New Mailing Address:

FEI Number: 59-3683073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURR, FERN C
2030 PALM WAY
SANFORD, FL 32773 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURR, FERN C
Address: 2030 PALM WAY
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FERN C BURR

Electronic Signature of Signing Officer or Director

PRES

05/25/2009

Date