

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000011399

FILED  
Jul 11, 2006  
Secretary of State

Entity Name: TOP NOTCH MORTGAGE COMPANY

**Current Principal Place of Business:**

10311 RADCLIFFE DR.  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

10311 RADCLIFFE DR.  
TAMPA, FL 33626

**New Mailing Address:**

FEI Number: 59-3695168

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DESAUTELS, SHEILA M  
6117 CHENE CT.  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

DESAUTELS, SHEILA M  
16601 SOUNDING SHORES  
ODESSA, FL 33556 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: SHEILA DESAUTELS

07/11/2006

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: D ( ) Delete  
Name: DESAUTELS, PHILIP R  
Address: 6117 CHENE CT.  
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete  
Name: DESAUTELS, SHEILA M  
Address: 6117 CHENE CT.  
City-St-Zip: LUTZ, FL 33549

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DESAUTELS, PHILIP R  
Address: 16601 SOUNDING SHORES  
City-St-Zip: ODESSA, FL 33556

Title: D (X) Change ( ) Addition  
Name: DESAUTELS, SHEILA M  
Address: 16601SOUNDING SHORES  
City-St-Zip: ODESSA, FL 33556

I hereby certify that the information supplied with this filing does not qualify for the 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: PHIL DESAUTELS

D

07/11/2006

Electronic Signature of Signing Officer or Director

Date