2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000104639

Entity Name: CITIZENS FIRST WHOLESALE MORTGAGE CO

FILED Mar 17, 2005 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
	CREST DRIN GES, FL 321			560 FIELDCREST DRIVE THE VILLAGES, FL 32162		
Current Mailing Address:				New Mailing Address:		
560 FIELD CREST DRIVE THE VILLAGES, FL 32159			560 FIELDCREST DRIVE THE VILLAGES, FL 32162			
FEI Number:	11-3654971	FEI Number Applied For ()	FEI Number Not	Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name	and Address o	of New Registered Agent:	
BURNSED, R. DEWEY 1028 LAKE SUMTER LANDING THE VILLAGES, FL 32162 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.						
SIGNATUR						
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: Title: Name: Address: City-St-Zip:	DAVIS, JOHN 1100 MAIN ST THE VILLAGE	S, FL 32159) Delete IRY REET	Title: Name: Address City-St-Z Title: Name: Address City-St-Z	Zip: THE VILLAG DCEO MORSE, H : 1020 LAKE	CREST DRIVE GES, FL 32162 (X) Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	MORSE, MAR 1100 MAIN ST THE VILLAGE	REET S, FL 32159) Delete DEWEY	Title: Name: Address City-St-z Title: Name: Address	Tip: THE VILLA D BURNSED,	(X) Change () Addition ARK SUMTER LANDING GES, FL 32162 (X) Change () Addition R. DEWEY SUMTER LANDING	
City-St-Zip: Title: Name: Address: City-St-Zip:	THE VILLAGE. D (WISE, JOHN 1100 MAIN ST THE VILLAGE.) Delete	City-St-Z Title: Name: Address City-St-Z	D WISE, JOH : 1020 LAKE	GES, FL 32162 (X) Change () Addition N SUMTER LANDING GES, FL 32162	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN E. DAVIS PRES 03/17/2005