

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068601

FILED
Feb 23, 2009
Secretary of State

Entity Name: EXCELLENT SERVICE MORTGAGE CORP.

Current Principal Place of Business:

1880 NW 24 TERRACE STE A
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1880 NW 24 TERRACE STE A
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 57-1176489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, SYDNEY
1880 NW 24 TERRACE STE A
FORT LAUDERDALE, FL 33311 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: BROWN, SYDNEY
Address: 1880 NW 24 TERRACE STE A
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: V P () Delete
Name: BROWN, YVONNE
Address: 11551 NW 17 CT
City-St-Zip: PLANTATION, FL 33323

Title: S (X) Delete
Name: BROWN, SYDNEY
Address: 1880 NW 24 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROWN, YVONNE
Address: 1880 NW 24 TERRACE STE A
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: ST (X) Change () Addition
Name: BROWN, YVONNE
Address: 1880 NW 24 TERRACE STE A
City-St-Zip: FORT LAUDERDALE, FL 33311

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: YVONNE BROWN

PD

02/23/2009

Electronic Signature of Signing Officer or Director

Date