2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2009
Secretary of State

DOCUMENT# P95000022047

Entity Name: ALLIANT MORTGAGE COMPANY, INC.

Current Principal Place of Business:

340 ROYAL POINCIANA WAY
SUITE 305
PALM BEACH, FL 33480 US

New Principal Place of Business:

Current Mailing Address:

340 ROYAL POINCIANA WAY
SUITE 305
PALM BEACH, FL 33480 US

New Mailing Address:

FEI Number: 65-0577821 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMLIN, CURTIS D
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205 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: VP ( ) Delete
Name: SCOTT, KOTICK
Address: 340 ROYAL POINCIANA WAY #305
City-St-Zip: COLUMBUS, OH 33480

Title: V ( ) Delete
Name: JENKINS, JAMES C
Address: 340 ROYAL POINCIANA WAY, STE 305
City-St-Zip: PALM BEACH, FL 33480 US

Title: PD ( ) Delete
Name: HORWITZ, SHAWN
Address: 340 ROYAL POINCIANA WAY #305
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: SHAWN HORWITZ PRES 02/18/2009

Electronic Signature of Signing Officer or Director Date