

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000021542

FILED
Jan 03, 2006
Secretary of State

Entity Name: UST MORTGAGE COMPANY

Current Principal Place of Business:

4601 TOUCHTON ROAD EAST
BUILDING 300, SUITE 3220
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

4601 TOUCHTON ROAD EAST
BUILDING 300, SUITE 3220
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 65-0649747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRESSOUD, DONALD A
4601 TOUCHTON ROAD EAST
BUILDING 300, SUITE 3220
JACKSONVILLE, FL 32246 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: PD () Delete
Name: BRESSOUD, DONALD A
Address: 4601 TOUCHTON ROAD EAST, BLDG 300 STE 3220
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SD () Delete
Name: DOWLING, JAMES V
Address: 132 ROYAL PALM WAY
City-St-Zip: PALM BEACH, FL 33480

Title: VT () Delete
Name: MATHEWS, PAULA M
Address: 4601 TOUCHTON ROAD EAST, BLDG 300 STE 3220
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: V () Delete
Name: DOWNEY, MERRILEE J
Address: 4601 TOUCHTON ROAD EAST, BLDG 300 STE 3220
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: V () Delete
Name: WARD, SHELLEY K
Address: 4601 TOUCHTON ROAD EAST, BLDG 300 STE 3220
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: V () Delete
Name: WILLIAMS, MICHELLE
Address: 4601 TOUCHTON ROAD EAST, BLDG 300 STE 3220
City-St-Zip: JACKSONVILLE, FL 32246 US

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:

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 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: DONALD A. BRESSOUD

P

01/03/2006

Electronic Signature of Signing Officer or Director

Date