2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 183792

Entity Name
KERWIN MORTGAGE CORPORATION

FILED Jan 11, 2007 08:00 AM Secretary of State

Principal Place of Business FREDERICK K. BROWN 5944 S.W. 73RD STREET MIAMI, FL 33143 Mailing Address

FREDERICK K. BROWN 5944 S.W. 73RD STREET MIAMI, FL 33143

|--|--|--|--|--|--|

DO	NOT	WRITE	IN	THIS	SPACE
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01082007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0745834

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

BROWN, FREDERICK K 5944 SW 73RD ST S MIAMI, FL 33143

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8.	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.	I am familiar with, and accept
	the obligations of registered agent,	

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. TITLE BROWN, FREDERICK K., JR. NAME 5944 SW 73RD ST. STREET ADDRESS CITY-ST-ZIP S MIAMI, FL TITLE NAME LINDA B.HO STREET ADDRESS 5944 SW 73RD ST. _ CITY-ST-ZIP S MIAMI, FL BROWN, LYNN M NAME 5944 SW 73RD ST STREET ADDRESS CTTY-ST-ZIP S MIAMI, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-78P TITLE

U00000583722 01/12/07-80007-025 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

PEDERICY IC BROWN ON PEDER OR DETECTOR

1/9/1017 Date

305-662-1472 Daytime Phone #