## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 518615**

FILED Jan 08, 2009 Secretary of State

Entity Name: TAYLOR MORTGAGE AND INVESTMENT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1111 KANE CONCOURSE,619 BAY HARBOR ISLANDS, FL 33154 **Current Mailing Address: New Mailing Address:** 1111 KANE CONCOURSE,619 BAY HARBOR ISLANDS, FL 33154 FEI Number: 59-1704646 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAYLOR, MITCHELL 1111 KANE CONCOURSE 619 BAY HARBOR ISLANDS, FL 33154 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition TAYLOR, MITCHELL, TAYLOR, MITCHELL, Name: Name: 1111 KANE CONCOURSE,619 1111 KANE CONCOURSE,619 Address: Address: City-St-Zip: BAY HARBOR ISLANDS, FL City-St-Zip: BAY HARBOR ISLANDS, FL 33154 VST Title: VST (X) Change ( ) Addition Title: () Delete Name: EEFTING, ILENE B., Name: EEFTING, ILENE B., 1111 KANE CONCOURSE,619 1111 KANE CONCOURSE,619 Address: Address: BAY HARBOR ISLANDS, FL BAY HARBOR ISLANDS, FL 33154 City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete EEFTING, ILENE B EEFTING, ILENE B Name: Name:

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

SIGNATURE: MITCHELL TAYLOR **PRES** 01/08/2009

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BAY HARBOR ISLANDS, FL

TAYLOR, CARL

BAY HARBOR, FL

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

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BAY HARBOR, FL 33154

TAYLOR, CARL

BAY HARBOR ISLANDS, FL 33154

(X) Change ( ) Addition