2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F00000004678

Entity Name: PRODUCERS MORTGAGE CORPORATION

FILED Dec 07, 2005 Secretary of State

- The section of the							
Current Principal Place of Business:				New Principal Place of Business:			
4710 E. BROADWAY MADISON, WI 53716				422 S. RIVER PARK DR. GUTTENBERG, IA 52052			
Current Mailing Address:			New Mail	New Mailing Address:			
4710 E. BROADWAY MADISON, WI 53716			PO BOX 3	422 S. RIVER PARK DR. PO BOX 340 GUTTENBERG, IA 520520340 US			
FEI Number:	39-1836217	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1200 SOUT PLANTATION The above in the State	of Florida.		pose of changing	its registered o	ffice or registered agent, or b	oth,	
SIGNATUR		Signature of Registered Agent	•		Date		
OFFICERS AND DIRECTORS: Title: SD () Delete			ADDITIOI Title:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DIR (X) Change () Addition			
Name: Address: City-St-Zip:	LUND-MUELLER 422 SOUTH RIVE GUTTENBERG, I	, DONNA M ER PARK DRIVE	Name: Address: City-St-Zip:	LUND-MUELLE 422 SOUTH RIV			
Title: Name: Address: City-St-Zip:	P ()[BAUMANN, STEF 4710 E BROADV MADISON, WI 5	VAY	Title: Name: Address: City-St-Zip:	LELIEFELD, KE 422 S RIVER P	Change () Addition WIN J ARK DR, BOC 340 IA 520520340 US		
Title: Name: Address: City-St-Zip:	VPT () [LELIEFELD, KEV 422 SOUTH RIVE GUTTENBERG, I	ER PARK DR	Title: Name: Address: City-St-Zip:	STEEN, ELIZAE 422 SOUTH RIV	Change () Addition BETH A /ER PARK DR, BOX 340 IA 520520340 US		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	WINCH, LYNNE 422 S RIVER PA	Change (X) Addition M ARK DR, BOX 340 IA 520520340 US		
Title: Name: Address: City-St-Zip:]()	Delete	Title: Name: Address: City-St-Zip:	VP () GIBSON, OWEI 127 W. 10TH S' KANSAS CITY,	T, SUITE 101		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELIZABETH A STEEN SEC 12/07/2005