2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001153

9108 FALLVIEW DRIVE

FISHERS, IN 46038

Address: City-St-Zip:

Entity Name: CONSUMER DISCLOSURE MORTGAGE, INC

FILED Mar 30, 2006 Secretary of State

| Entry Name: Concomer Biodecooke Mon | GAGE, IIVG. |
|---|---|
| Current Principal Place of Business: | New Principal Place of Business: |
| 9108 FALL VIEW DRIVE FISHERS, IN 46038 | |
| Current Mailing Address: | New Mailing Address: |
| 9108 FALL VIEW DRIVE FISHERS, IN 46038 | 9108 FALL VIEW DRIVE FISHERS, IN 46037 |
| FEI Number: 35-2121035 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: | |
| COMPLIANCE CONSULTING CORPORATION OF DA 521 LAKE AVENUE, STE 4 LAKE WORTH, FL 33460 US | FLORI |
| The above named entity submits this statement for in the State of Florida. | the purpose of changing its registered office or registered agent, or both, |
| SIGNATURE: | |
| Electronic Signature of Registered | d Agent Date |
| Election Campaign Financing Trust Fund Contribution (). | |
| OFFICERS AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |

Title: (X) Change () Addition () Delete Title: SNYDER, STEPHEN SNYDER, STEPHEN Name: Name: 9108 FALLVIEW DRIVE 9108 FALLVIEW DRIVE Address: Address: City-St-Zip: FISHERS, IN 46038 City-St-Zip: FISHERS, IN 46037 Title: VΡ () Delete Title: VΡ (X) Change () Addition STARK, REBECCA STARK, REBECCA Name: Name: Address: 9108 FALLVIEW DRIVE Address: 9108 FALLVIEW DRIVE FISHERS, IN 46038 FISHERS, IN 46037 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete SEC (X) Change () Addition Name: MOHLENHOFF, DALE G Name: MOHLENHOFF, DALE G

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.

Address:

City-St-Zip:

9108 FALLVIEW DRIVE

FISHERS, IN 46037

SIGNATURE: STEPHEN SNYDER PRES 03/30/2006