

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003162

FILED
Jan 29, 2008
Secretary of State

Entity Name: ABO MORTGAGE CORPORATION

Current Principal Place of Business:

5700 DEMOCRACY DRIVE
PLANO, TX 75024

New Principal Place of Business:

Current Mailing Address:

5700 DEMOCRACY DRIVE
PLANO, TX 75024

New Mailing Address:

FEI Number: 75-2916986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PSD () Delete
Name: BLOOM, DANIEL
Address: 5700 DEMOCRACY DRIVE
City-St-Zip: PLANO, TX 75024

Title: COO () Delete
Name: BLOOM, DANIEL
Address: 5700 DEMOCRACY DRIVE
City-St-Zip: PLANO, TX 75024

Title: CEOC () Delete
Name: BLOOM, DENNIS
Address: 5700 DEMOCRACY DRIVE
City-St-Zip: PLANO, TX 75024

Title: () Delete
Name:
Address:
City-St-Zip:

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: ASTS () Change (X) Addition
Name: SHEPHERD, SHERI D
Address: 5700 DEMOCRACY DRIVE
City-St-Zip: PLANO, TX 75024

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.

SIGNATURE: SHERI SHEPHERD

ASTS

01/29/2008

Electronic Signature of Signing Officer or Director

Date