

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000948

FILED  
Aug 04, 2005  
Secretary of State

Entity Name: INDIANA MORTGAGE NETWORK, INC.

## Current Principal Place of Business:

8395 KEYSTONE CROSSING  
#202  
INDIANAPOLIS, IN 46240

## New Principal Place of Business:

8395 KEYSTONE CROSSING  
300  
INDIANAPOLIS, IN 46240

## Current Mailing Address:

8395 KEYSTONE CROSSING  
#202  
INDIANAPOLIS, IN 46240

## New Mailing Address:

8395 KEYSTONE CROSSING  
300  
INDIANAPOLIS, IN 46240

FEI Number: 52-2281951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEARS, STEPHEN D  
25220 PELICAN CRK CIR., #202  
BONITA SPRINGS, FL 34134 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: P ( ) Delete  
Name: SPECTOR, JASON H  
Address: 10845 GEIST WOOPS LANE  
City-St-Zip: INDIANAPOLIS, IN

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SPECTOR, JASON H  
Address: 10845 GEIST WOOPS LANE  
City-St-Zip: INDIANAPOLIS, IN 46256

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: JASON SPECTOR

P

08/04/2005

Electronic Signature of Signing Officer or Director

Date