2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005
Secretary of State

DOCUMENT# F02000001521

Entity Name: SUMMIT HOME MORTGAGE, INC.

Current Principal Place of Business:

605 N. US HWY 169
SUITE 700
PLYMOUTH, MN 55441

New Principal Place of Business:

Current Mailing Address:

605 N. US HWY 169
SUITE 700
PLYMOUTH, MN 55441

New Mailing Address:

FEI Number: 41-1726353 **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: DP ( ) Delete
Name: CARTER, ROBERT L
Address: 605 N US HWY 169, SUITE 700
City-St-Zip: PLYMOUTH, MN 55441

Title: DS ( ) Delete
Name: CLARKE-CARTER, DIANA J
Address: 605 N US HWY 169, SUITE 700
City-St-Zip: PLYMOUTH, MN 55441

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change ( ) Addition
Name: CLARKE-CARTER, DIANA J
Address: 605 N US HWY 169, SUITE 700
City-St-Zip: PLYMOUTH, MN 55441

Title: VP ( ) Change (X) Addition
Name: HENSON, LARRY W
Address: 605 N US HWY 169, SUITE 700
City-St-Zip: PLYMOUTH, MN 55441

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: LARRY W. HENSON VP 01/10/2005
Electronic Signature of Signing Officer or Director Date