

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003953

**FILED**  
**May 05, 2005**  
**Secretary of State**

**Entity Name:** SCHOOL OF MORTGAGE LENDING, INC.

**Current Principal Place of Business:**

800 BELLEVUE WAY NE  
4TH FLOOR  
BELLEVUE, WA 98004

**New Principal Place of Business:**

**Current Mailing Address:**

800 BELLEVUE WAY NE  
4TH FLOOR  
BELLEVUE, WA 98004

**New Mailing Address:**

**FEI Number:** 91-1710552      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

A1A REGISTERED AGENT INC  
92 SADBERRY ROAD  
QUINCY, FL 32351 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: WILLIAMS, SUSAN  
Address: 48 INEZ ST  
City-St-Zip: NARRAGANSETT, RI 02882

Title: D ( ) Delete  
Name: PFEIFERS, WILLIAM D  
Address: 48 INEZ ST  
City-St-Zip: NARRAGANSETT, RI 02882

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: SUSAN WILLIAMS

C

05/05/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date