

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004452

FILED
Jan 19, 2007
Secretary of State

Entity Name: MORTGAGE & INVESTMENT CONSULTANTS, INC.

Current Principal Place of Business:

2978 RICE STREET
ST PAUL, MN 55113

New Principal Place of Business:

2489 RICE STREET
SUITE 200
ST PAUL, MN 55113

Current Mailing Address:

2978 RICE STREET
ST PAUL, MN 55113

New Mailing Address:

2489 RICE STREET
SUITE 200
ST PAUL, MN 55113

FEI Number: 41-1955278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDON, LORI
4014 GUNN HIGHWAY
SUITE 255
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

SANDON, LORI
14502 N DALE MABRY HWY
SUITE 200
TAMPA, FL 33618 US

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: LORI K SANDON

01/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NIVEN, BLAINE
Address: 2978 RICE STREET
City-St-Zip: ST. PAUL, MN 55113

Title: TREA () Delete
Name: KLEIST, KEVIN
Address: 2978 RICE STREET
City-St-Zip: ST. PAUL, MN 55113

Title: SEC (X) Delete
Name: WEBSTER, JAMES
Address: 2978 RICE STREET
City-St-Zip: ST. PAUL, MN 55113

Title: VP () Delete
Name: CUMMINGS, TIM
Address: 2978 RICE STREET
City-St-Zip: ST. PAUL, MN 55113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NIVEN, BLAINE
Address: 2489 RICE STREET #200
City-St-Zip: ST. PAUL, MN 55113

Title: TREA (X) Change () Addition
Name: KLEIST, KEVIN
Address: 2489 RICE STREET #200
City-St-Zip: ST. PAUL, MN 55113

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

Title: VP (X) Change () Addition
Name: CUMMINGS, TIM
Address: 2489 RICE STREET #200
City-St-Zip: ST. PAUL, MN 55113

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.

SIGNATURE: KEVIN KLEIST

TREA

01/19/2007

Electronic Signature of Signing Officer or Director

Date